

Community Health Assessment 2019 Scotland County, NC



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Executive Summary

Background and Purpose

A community health needs assessment is a process by which community members gain an understanding of the health, concerns, and health care systems of the community by identifying, collecting, analyzing, and disseminating information on community assets, strengths, resources and needs. There are four basic steps to the assessment process:

- Determine the health status of the community
- Assess risk factors associated with identified health problems
- Identify the health care resources available in our community to promote action directed toward the identified problems
- Establish health priorities and the appropriate interventions

Methodology, Data Collection and Analysis

Every three years, local health departments across the state of North Carolina are mandated to complete a comprehensive Community Health Needs Assessment (CHNA). It is a requirement of the consolidated agreement between the health departments and the NC Division of Public Health, and the project requires community involvement and collaboration. Although many hospitals were already partnering with health departments to complete this project, the Internal Revenue Service mandated in 2012, that all not-for-profit hospitals participate in a community health assessment every three years.

In the fall of 2018, Scotland County Health Department and Scotland Health Care System began the implementation of the 2019 Community Health Needs Assessment (CHNA) for Scotland County. The effort focuses on assessing community health needs, local health resources, barriers to care, gaps in services and trends regarding health and healthy lifestyles. The resulting CHNA will be utilized to document community need and link those needs to community benefit efforts. The needs assessment will be utilized to assist the health department and hospital in planning and prioritizing its community outreach and programs through action plans and strategic planning.

Through this assessment, health concerns that affect our population, including available resources that can address these concerns, have been identified. The assessment report serves as a basis for improving and promoting the health of Scotland County residents and can be used as a planning tool to determine the focus and direction in addressing health and community concerns through 2022.

Results of Primary Data via Surveys

The Scotland County Community Health Assessment Survey was developed and distributed throughout the county to collect primary data from the community through hard copies as well as internet surveys. Nearly 600 surveys were either distributed or answered via Survey Monkey, and focus groups also conducted to further identify or confirm priorities for our County. Survey Results are provided in the Appendix Section. Following is data related to the surveys.

- Leading causes of death – *heart disease, cancer, homicide/violence, diabetes, drug/alcohol use*
- Priority health issues – *high blood pressure, diabetes, heart disease, obesity, cancer*
- Priority risk factors – *lack of physical activity, poor nutrition, use of tobacco/vaping, substance misuse, and crime/violence,*
- Leading factors affecting families seeking medical treatment – *lack of insurance, unable to pay for visit to doctor, no appointments available when needed, and transportation*

- General concerns – *economic/unemployment, health insurance, mental health, crime, lack of positive youth activities, substance misuse*
- Environmental concerns – *safe places to walk and play, healthier food choices,*
- Educational opportunities – *chronic diseases, substance abuse, smoking cessation, pregnancy prevention, wellness services/programs, sexually transmitted diseases*
- Would like to see more of – *job opportunities, after school programs, recreation facilities, dental services, substance abuse rehabilitation and mental health services*
- Respondents indicated they support tobacco-free public places/buildings in Scotland County

Identified Health Priorities and Areas of Opportunity

A variety of data and information was collected and analyzed in order to identify key priority health needs of the community. The prioritization process included review and analysis of:

- 1) **Primary** - qualitative community feedback 2) **Secondary** - quantitative statistical data

The 2019 Community Health Assessment Survey results indicated respondents felt the top five community health priorities were High Blood Pressure, Heart Disease, Diabetes, Obesity and Cancer. The top five behavior risks identified were lack of physical activity, poor nutrition, use of tobacco, substance misuse (alcohol/drug use) and crime/violence. The table below depicts the top ten priority health concerns in 2019 with the three health issues highlighted in red as the new areas to focus on.

2019 Health Priorities	2019 Behavior Risk
Obesity	Lack of Physical Activity
High Blood Pressure	Poor Nutrition
Cancer	Use of Tobacco/Vaping Products
Diabetes	Substance Abuse (Drug/Alcohol)
Heart Disease	Crime/Violence
Stroke	Lack of Dental Health
Mental Health	Environmental Factors
Dental Health	Seatbelt Use
Asthma/Lung Disease	Bullying
Substance Misuse	Unprotected Sex

In addition to review of the above, additional meetings with stakeholders and community members were facilitated to develop action plans concerning the health issues indicated by the community responses. To select priorities and related strategies, the following criteria were considered:

- Data and community feedback indicated the issue as an important community need
- Scotland County Health Department and Scotland Health Care System has the capacity to impact the issue
- Addressing a selected issue holds the potential to affect other key health conditions, therefore creating a multiplying effect
- Strategies selected align with and support the Scotland County Health Department and Scotland Health Care System's mission, vision and strategic plans
- Strategies selected take in consideration current assets in both the community and within Scotland County Health Department and Scotland Health Care System, along with those identified in the Healthy North Carolina 2020 Objectives

In considering the above, the following were selected as priorities:

1. Obesity (Hypertension, Heart Disease, Diabetes and Cancer)

Overweight and obesity are the accumulation of abnormal or excessive fat that poses a risk to overall health. Over the last few decades there has been a drastic increase in the prevalence of obesity. This public health crisis increases individual's chance of developing type 2 diabetes, high blood pressure, certain cancers, stroke and heart disease. Overweight and obesity are significant risk factors for both children and adults in Scotland County and is the number one health problem in children. Based on Scotland County data, people are experiencing a higher percentage of poor health, poor physical health days, and more physical distress compared to other counties in North Carolina.

Diabetes prevalence is 14%, adult obesity is 36%, physical inactivity is 28%, and access to exercise opportunities is 68%, high rates of heart disease and hypertension, all of which show poorer performance levels than the state average. In addition, the county's food environment index is 5.5/10.0 and 25% of our population experiences food insecurity, while 8% have limited access to healthy foods.

To combat obesity and related health conditions, several programs will be maintained, enhanced, and/or initiated that include screenings to identify potential risk factors or detect early-age disease, increase community access to fresh produce, offer support groups and provide education concerning nutrition, heart health and disease prevention or management.

2. Mental Health and Substance Use/Misuse including Tobacco/E-Cigarettes

In the United States, 1 in 5 or approximately 45.6 million adults experience a mental health condition each year. Despite high prevalence, stigma and other barriers often prevent people from receiving needed mental health care. As a result, many engage in substance misuse. Prescription and illicit drug abuse is classified as an epidemic and drug overdose rates have tripled in the last few decades.

Based on Scotland County data, people experience more poor mental health days, more frequent mental distress, and have a lower quality of life compared to other counties in North Carolina. Additionally, adult smoking (23%), the dramatic increase of middle and high school students use of e-cigarettes (20.8% in the US), excessive drinking (13%), alcohol-impaired driving deaths (29%), and insufficient sleep (39%). There are also more reported drug overdose deaths when compared to the national level, but the data is consistent with that of the state.

Addressing mental health and substance use/misuse is one of the county's top priorities for public health along with a revitalized Opioid Prevention Education Network (O.P.E.N.). To address the existing issues, several initiatives, programs or collaborative will be maintained, enhanced and/or initiated. These will continue to address the opioid crisis and other substance abuse problems including tobacco and e-cigarette use, training community members, nurses, physicians, EMS, Law Enforcement on use of Naloxone to prevent or reduce overdose deaths in Scotland County. Education concerning substance misuse along with promotion of prevention will also ensue.

Scotland continues to collaborate with Eastpointe (Mental Health, Substance Abuse and Suicide Prevention). As of October 2018, there are 23 private providers (for-profit and non-profit) endorsed by Eastpointe to provide at least one service related to mental health, developmental disabilities, and substance misuse. There are also at least three additional providers with licensed staff providing professional mental health services in Scotland County. Several services remain in short supply – psychiatric services, outpatient substance abuse services, intensive in home services, and day treatment programs. Often, clients need to go to more than one provider to receive services determined to be medically necessary and appropriate. To access mental health in Scotland County, individuals now have to refer the Eastpointe Call Center at 1-800-913-6109 or TTY 1-888-819-5112, or their health care providers.

3. Positive Youth Engagement and Healthy Behaviors including Physical Activity and Nutrition

Although one's youth is typically the most dynamic and healthy stage, it is also one of the most critical stages of human development. Adolescents are more vulnerable in certain situations and are at risk of making unsafe or unhealthy choices. These unhealthy behaviors may lead to long-term risk factors for health conditions as adults. Therefore, it is important to promote physical, emotional and intellectual well-being. It is also necessary to engage youth in situations that engage them in positive social roles and relationships.

Based on Scotland County data, there is a significantly higher number of premature deaths, higher rates of child and infant mortality, and higher teen birth rates compared to other counties in North Carolina. Additionally, low birthweight is 13%, uninsured children is 4%, high school graduation is 87%, children in poverty is 39%, children in single-parent households is 52%, and disconnected youth is 14%.

According to the NC Pediatric Nutrition and Epidemiology Surveillance System (NC-PedNESS, 2015), for Scotland County, 13% of children 2-4 years of age are overweight and 13.4% are obese and 18.8% of our children aged 5 to 11 years are overweight and 12.5% were obese ranking us 30th in the state. The North Carolina Child Health Report Card 2018 reported only 23.3% of children met the recommended total of 60 minutes or more per day on five days or more in 2016.

To promote positive youth activities, several programs will be initiated collaboratively that will offer parent development, professional development for daycare workers, teachers, youth coordinators, etc. and provide education on topics including: physical and dental health, bullying, seatbelt safety, substance use/misuse, prevention of tobacco/e-cigarette use, nutrition, mental health, safe sex and literacy.

Next Steps....

The next step in this process will be to develop community improvement plans that will address the identified priorities for the next three years (2020-2022). Scotland County Health Department along with Scotland Health Care System will develop measureable objectives and using evidence-based strategies to address these priorities. For more information or how to become involved, contact Scotland County Health Department at (910) 277-2440 or Scotland Healthcare System at (910) 291-7624.

Dissemination of Community Health Needs Assessment Report

This Community Health Needs Assessment Report will be made widely available to the public, to key stakeholders, agencies and posted on Scotland County's website: www.scotlandcounty.org under "Health Department", Scotland Health Care System's website: www.scotlandhealth.org, made available at Scotland County Memorial Library, at each municipality offices, and other agencies upon request along with providing the report to Scotland County's Legislative and Senate Representatives.



St. Andrew's University Equestrian Center

~Acknowledgements~

Scotland County Health Department and Scotland Health Care System would like to thank all those who volunteered their time and effort toward planning, developing, and completing the Scotland County Community Health Needs Assessment 2019 (CHNA). Special acknowledgement is given to the Community Health Assessment Core Work Group for their creative contributions and time to this body of work. The newly formed (Scotland County) Community Health Advisory Board, CHNA Team and Core Work Group, and community members are also recognized for their time and consideration in analyzing this assessment data to help create action plans delineating the focus and direction for Scotland County Health Department and Scotland Health Care System.

Thank you to Dr.'s Cherry Beasley and Bradley Fevrier, Health Sciences Department and students with The University of North Carolina at Pembroke for participation and input; and UNCP Student Interns, who helped with survey input, research and data entry; Lisa Hunt, Director Community Health and Maggie McGee, Health Educator, who created the survey for distribution on Survey Monkey, helped with data analysis report, provided links to survey on various websites and created Scotland Health Care System's third CHNA Report and especially to all staff, agencies, community volunteers and the Community Health Advisory Board who helped provide valuable input along with distributing the surveys county-wide.

It is hoped the work of these individuals, separately and in committee, will serve to enhance health and community services, promote healthy lifestyles and a healthy environment in Scotland County.

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Preface

In the fall of 2018, Scotland County Health Department and Scotland Health Care System began the process and implementation of a Community Health Needs Assessment (CHNA) for Scotland County. This collaborative effort focuses on assessing community health needs, local health resources, barriers to care, and trends regarding health and healthy lifestyles. The resulting CHNA will be utilized to document community need and link those needs to community efforts of our health systems. The needs assessment will be utilized to assist the health department and hospital in planning and prioritizing its community benefit investments and outreach efforts.

The 2019 CHNA Report, an accreditation requirement for Scotland County Health Department, is Scotland County's *sixth* Community Health Assessment since 2001. The community health assessment is a process by which community members gain an understanding of the health, concerns, and health care systems of the community through identifying, collecting, analyzing, and disseminating information on community assets, strengths, resources, and needs.

The concerns of the community (primary data) were received through a health opinion survey disseminated randomly throughout Scotland County in 2019 with a total of nearly 600 surveys received. Secondary (or statistical) data from the NC State Center of Health Statistics, NC Division of Health and Human Services and local organizations were also accumulated to identify health problems, evaluate health resources, and develop strategies for addressing these problems in Scotland County. The assessment provides direction and focus for the Community Health Advisory Board (formerly the Active, Healthy Living Partnership), Scotland County Health Department, Scotland Health Care System, and Scotland County Department of Social Services, Scotland Cancer Treatment Center, Scotland Community Health Clinic and many other community agencies and organizations in Scotland County.

Scotland County Health Department must provide the State of North Carolina, Department of Health and Human Services, a comprehensive community health assessment every three years and a State of the County Health Report in each of the interim years. The North Carolina Division of Health and Human Services administers this three-year cycle. Support and training for this community assessment is provided by the North Carolina Division of Public Health.

The Scotland County Community Health Improvement Plans focusing on the identified top three priorities of Obesity (physical activity/nutrition (youth) and chronic diseases (adults), Mental Health (quality of life), Substance Misuse (opioids, tobacco/e-cigarettes), and Youth Behaviors corresponding with the Healthy North Carolina 2020/2030 focus areas, and will follow in the summer of 2020.



St. Andrew's University Bagpipers, 2018

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John Blue Cotton Festival, Laurinburg, NC 2018

Section I

Introduction

The Scotland County Community Health Assessment 2019 serves as a basis for improving and promoting the health of Scotland County residents. Through this assessment, health concerns that affect our population including available resources that can address these concerns have been identified. The information will assist health organizations within Scotland County in determining priority health issues, identifying resources, and planning community health programs. Responses were sought from all areas of the county and across the board representation provided from all communities and ethnicities to complete the assessment. The results of this assessment are available as a planning tool to determine the focus and direction in addressing health and community concerns with the Healthy People 2020 Objectives in mind.

~Scotland County, North Carolina~

Geography

Scotland County is nestled on the border of North and South Carolina known as the 'Sandhills Region', just 100 miles from sandy beaches to the east and a few hours from the magnificent mountains to the west. Scotland County is halfway between Charlotte, the state's largest city, and Wilmington, the state's largest port and only two hours from our state capital, Raleigh. Interstate 95 is just minutes away and four U.S. highways intersect the county. The Lumber River flows along the northeastern edge of the County. Laurinburg is Scotland County's largest town and also serves as the county seat. Gibson, Wagram, East Laurinburg, Laurel Hill and part of the town of Maxton make up the various communities in the county. The surrounding counties include Hoke, Moore, Richmond and Robeson County and Marlboro County in South Carolina.

Scotland County has a total area of about 319.14 square miles with 318.99 square miles of land area. Its land size is 18 miles east to west and 25 miles north to south. The elevation of Scotland County is 227 feet above sea level. The county's average temperature is 49 degrees Fahrenheit in January and 80 degrees Fahrenheit in July. The average annual rainfall is 48 inches.

History

The earliest settlers of Scotland County were composed mainly of Highland Scots. It is believed that settlers arrived in what is now Scotland County as early as 1729. Today long-time Scotland County residents can trace their ancestry to a variety of ethnic heritages including African American, Scotch-Irish, English and Welsh. The political beginning for Scotland County occurred in 1899 when the legislature of North Carolina created Scotland County from the original county of Richmond. In the following years, Laurinburg grew as a result of the railroad and the textile industry.

Scotland County is an "All-America" county with Laurinburg, the county seat, capturing three All-America City awards. Though Scotland is one of the smaller counties in North Carolina, it exemplifies a commitment to excellence and a tradition of continuous self-improvement. It stands tall in economic development, community pride and volunteerism.

Scotland County is home to 15 major industries, seven shopping centers, one university, a hospital/health care system, nine public schools, one early college high school, three private schools and nearly 150 Churches, St. Andrews Presbyterian University, Scotia Village Retirement Community, and the Lumber River Canoe Trail.

Demographics

In July 2018, the estimated population of **Scotland County** was 35,093, for total population in North Carolina and designated as "rural" in the United States census. This represents a change of -2.9% since April 1, 2010. Nearly 18,660 (51.6% urban) citizens live in Laurinburg, the County seat, and 48.4% (rural areas). **Laurinburg, Gibson, Wagram, East Laurinburg**, unincorporated **Laurel Hill** and **Maxton** make up the various townships/communities in the county.

Scotland County Community Health Assessment | 2019

Population density is 113.4 per square mile. The population growth projection for 2018 is 34,810. The median age in Scotland County is 39 yrs.

A table depicting population percentages by race follows using Richmond County as a peer county and the State of North Carolina:

Race	Scotland County	Peer County	North Carolina	Gender	Male	Female
White	44.3%	61.4%	62.8%			
Black	39.6%	32.0%	22.2%	Scotland	49.6%	50.4%
American Indian	13.1%	3.2%	1.6%	North Carolina	48.6%	51.4%
Hispanic	2.9%	6.7%	9.6%			

(Scotland County Quick Facts from US Census Bureau 2018 estimate)

Age Distribution 2017: Age 0-17 (23.0%) Age 18-64 (59.3%) Age 65+ (17.7%)

Socioeconomic Factors:

Year	Scotland County Per Capita Income	North Carolina Per Capita Income	United States Per Capita Income
2013 to 2017	\$17,103	\$28,123	\$31,177

(Scotland County US Census Bureau 2013-2017)

Scotland County 2018-2019:

- Adopted tax rate is \$1.00 within city limits
- Adopted tax rate is \$1.05 for the county;
- Current city tax rate is .40 per \$100 valuation
- Projected Median Household Income - \$32,739
- Average weekly wage for all industries – approx. \$701 (1st Qtr 2019)

Scotland County Poverty Rate: (2013-2017) **26.4%** **NC Poverty Rate:** (2013-2017) **14.7%**

- Richmond County 24.8%
- Bladen County 20.7%
- Anson County 22.2%
- Montgomery County 17.8%

The percent of poverty/economic hardship varies by race: (2013-2017)

- African American 45.1%; American Indian 39%; White 16.2%
- Child Poverty rate – 39.3% compared to North Carolina rate of 36.0%
- Elderly Poverty rate – 9.1% compared to North Carolina rate of 12.3%
- Low-income less than twice the federal poverty level – 57.3%
- Children eligible for free or reduced price lunch – 98%

With the upturn in the economy over the past recent years, poverty rates have decreased slightly but are much higher than the nation's 11.8% poverty rate. Scotland County's poverty rate decreased slightly from 27.6% in 2016 to 26.4% in 2017, when compared to the state's poverty level of 14.7%. (US Census Bureau, 2013-2017). (NC Department of Commerce/ACCESSNC October 2019).

Medicaid Eligibility

According to the NC Office of State Budget and Management (January 2019), 14,296 people in Scotland County were eligible for Medicaid in December 2018. The table below compares peer counties lowest to highest and in North Carolina:

Medicaid Eligible Population			
Residence	2017	2018	2019
North Carolina	2,345,637	2,146,352	n/a
Montgomery	8,087	8,262	n/a
Anson	8,182	8,484	n/a
Bladen	10,566	10,891	n/a
Scotland	13,806	14,296	n/a
Richmond	17,104	17,972	n/a

NC Department of Health and Human Services/LINC 2018

Employment/Unemployment

Since 2017, the unemployment rate in Scotland County was at 7.9% and in November 2019 at 6.1%. The following chart shows the unemployment rate and ranking trend since 2017 showing our economically distressed county continuing to be one of the highest in the state:

Year	Unemployment Rate	Rank in North Carolina	Unemployment Rate/NC
2017	7.9%	1	4.3%
2018	7.6%	1	3.7%
2019	6.1%	2	3.8%

As of this report, the **top three employers** in Scotland County are: Scotland County Schools with over 850 employees, Scotland Memorial Hospital with approximately 560 employees and County and Municipal Governments with up to 500 employees along with 15 manufacturing industries with over 100 employees each.

(NC Dept. of Commerce/ACCESSNC November 2019)

Approximately 79.6% of the workforce is in private industry and 16.2% in government. There are approximately 19.6% of Scotland County residents employed in manufacturing, 12.5% in retail, 28.4% in educational services, healthcare and social assistance, and 4.7% in public administration. Other employment percentages show 8.8% in arts, entertainment, recreation and food services, 4.3% in construction, 3.0% in transportation, 3.3% in real estate and finance, and 3.2% in agriculture and forestry.

Unemployment Rates Peer Counties			
Residence	2017	2018	2019
North Carolina	4.3%	3.7%	3.8%
Montgomery	4.2%	3.5%	3.5%
Anson	4.6%	4.3%	4.1%
Bladen	5.6%	5.1%	4.3%
Richmond	5.4%	5.0%	4.9%
Scotland	7.0%	7.0%	6.1%

NC Dept. of Commerce Labor & Economics/ACCESSNC (2019)

Social Services

In F/Y **2018-2019**, Social Services investigated **525** reports of Child Abuse/neglect and substantiated **104** of those reports. DSS evaluated **28** reports of abuse, neglect and exploitation of disabled adults and **5** cases were substantiated. DSS maintained **9,724** total Medicaid cases and **14,763** individuals received benefits from Medicaid.

The Social Services staff provided child care subsidies for **385** children at a cost of **\$1,966,043**, to enable parents to train for work or go to work. DSS issued **\$13,928,012** in Food Assistance to **4,708** families, including children, elderly and disabled adults. DSS collected **\$5,179,745** in child support payments and established paternity for **235** children, located **235** non-custodial parents, and established and enforced **4,469** support order/obligations.

DSS also approved **435** applications to receive **\$106,953** in Crisis Intervention funding toward heating or cooling costs and assisted **1,187** households with Low Income Energy Assistance totaling **\$301,500**. **There were also 13 Energy Neighbors Applications totaling \$2,740.**

(Scotland County Department of Social Services Annual Report 2019)

Education

The **Scotland County School System** is home to six elementary schools serving students grades Pre-K through five: I. Ellis Johnson, Laurel Hill, North Laurinburg, South Scotland, Wagram and Sycamore Lane; two middle schools serving students grades six through eight: Carver and Spring Hill; one early college high school that allows students to attain a high school diploma and an associate's degree in five years on the campus of Richmond Community College. Shaw Academy serves students in grades 6 through 12 who have difficulty adjusting to a more structured environment.

Scotland County Schools are committed to addressing the needs of the "whole child" by having healthy, safe and orderly schools. Many programs and services are available for children at risk of academic failure. **Students in our county have access to 8 social workers, 10 nurses, 15 school counselors, 5 school psychologists, 4 School Based Mental Health Workers, 2 Attendance Liaisons and 1 Director of Student Support Services.** These professionals can work with students on an individual and/or group basis to address barriers that prohibit them from being successful in school.

Scotland County School system is one of twenty-one school systems in North Carolina selected for the school based **Child and Family Support Team Initiative**, now in its twelfth (2019-2020) year of implementation. Teams of nurses and social workers have been placed in six schools within the district to assist children and families in securing resources and services to help the child be successful in school. This initiative is voluntary and family centered. Action plans are developed in collaboration with other community programs and services that address the needs of the family. Plans are underway to train personnel in the remaining schools to facilitate child and family meetings as these meetings have proven to be very productive.

School Nurse to Students Ratio: 1 to 553.80. Scotland County school nurses are very busy with a variety of duties including screening children for health risks (vision, hearing, blood pressure, height, weight, etc.), developing emergency action plans, and individual health plans for students with ongoing health issues. Homebound services are offered to address the academic needs of students who have to be out of school for an extended period due to health concerns. The system also has a protocol in place for mental health emergencies to assist students with remaining safe and obtaining the help that they need.

The **Scotland County Child Nutrition Department** consists of 91 full and part time employees. They serve an average of 6000 meals (breakfast and lunch) a day. **Currently, 100% of the student body is eligible for free or reduced lunches through the Community Eligibility Provision (CEP); part of the Healthy Hunger Free Kids Act of 2010.** The Child Nutrition Department's goal is to serve good, nutritious meals in a clean, safe and friendly environment.

All schools have a "**Multi-Tiered Systems of Support**" Team (MTSS) which assists children who may be having any variety of difficulties. The majority of the SCS are trained to implement Positive Behavioral Interventions and Supports (PBIS) which is an evidence-based program proven to reduce school behavior problems. The On Track Progress Teams work diligently to reach students who have dropped out, or are considering dropping out. The Judicial Attendance Council has been successful in increasing the attendance of students referred for truancy issues. This council meets monthly and includes a variety of members in the community.

Graduation Rates: The overall four-year cohort graduation rate for Scotland High, the Early College and Shaw Academy was 81.2%. Scotland Early College had a graduation rate of ≥95%. The North Carolina Department of Public Instruction has not yet released the official drop out data for the 2018-2019 year, but the Scotland County School system had a rate of 1.45 in 2017-2018, which is the lowest since data started being tracked. **The graduation rate for black students at Scotland High School was 87.3%. The rate for white students was 77.2 %, American Indian students was 71.9% and Hispanic students had a graduation rate of 90.0%. Shaw Academy's graduation rate was 75%. In 2019, the average SAT Score was 989 (1600 new scale).**

Proficiency Rates: Scotland County's proficiency rate for End of Grade in ELA was 41% while the state average is 58.2%. In addition, 44.6% of students were proficient in math (58.6% for NC), 42.2% proficient in biology (59.6% for NC), and 44.8% proficient in English (59.7% for NC).

Private Schools include the **Laurinburg Institute** - a private secondary school that serves African-American high school students; the **Scotland Christian Academy** that serves approximately 250 students in kindergarten to 11th grade, **Westside Baptist Church School** and **Stewartsville Baptist Church** that serves kindergarten through 12th grade.

Higher education - Scotland County is home to **St. Andrews Presbyterian University** – a 4-year liberal arts college serving approximately 900 students from all over the world. **Richmond Community College** operates centers in Scotland County and focuses its vocational program in this area. The **University of North Carolina Pembroke** is located 15 minutes to the east of Laurinburg in neighboring Robeson County and offers a full range of undergraduate and graduate degrees.

Educational Attainment – Scotland County (2013-2017)

- 78.4% graduation rate compared to 86.9% of North Carolina residents aged 25 years or older graduated from high school (2013-2017)
- 15.9% of adults had a bachelor's degree or higher compared to 29.9% for the state.
- 87.3% graduation rate for African Americans; 90.0% for Hispanics; 71.9% for American Indians (2017-2018)
- Approx. 20.3% of adults over the age of 25 in Scotland County have less than a high school education and read at the Level 1 literacy rate. (US Census Bureau, Scotland County Quick Facts/NCEDIS).

Environment/Air Quality/Heat Index

The Environmental Health Section of Scotland County Health Department protects and improves the public's health by controlling the environmental factors which can adversely affect human health. Environmental Health Specialists provide preventive health through inspections, education, and enforcement of state and local rules in programs for food and lodging, on-site wastewater disposal, pools, tattoo establishments and institutions, poisoning and animal control. Scotland County Health Department has two Environmental Health Specialists and two Animal Control Officers to provide services for the county.

In F/Y 2018-2019, the Environmental Health Department provided **32** new well permits (down from 38 in F/Y 2017-2018); **105** on-site wastewater improvement permits (down from 109 in F/Y 2017-2018); **132** food and lodging establishment inspections, **20** swimming pool inspections (up from 17 in 2017-2018), **35** day care inspections with **3** child lead exposure; Responded to complaints as follows: **1** sewage; **3** food, **1** water, **0** livestock and **22** mold complaints.

The North Carolina Division of Air Quality (NCDEQ) monitors the condition of outdoor air tracking. Air Quality measures how clean the air is and the health effects that are concerned across the state to protect the public from harmful ozone and fine particle pollutants.

Each summer brings hot weather to the Carolinas, but occasionally a period of exceptional heat develops and lingers for days or weeks. These *heat waves* can injure or kill people, animals, and plants exposed to the sun and hot temperatures for long periods of time. Large electrical demand for air conditioning can, in exceptional cases, lead to local or regional power disruptions. Crops and livestock can also be affected

by drought, which has accompanied many of our worst heat waves. Destructive wildfires can spread in the dry conditions during these drought/heat wave combinations. Through August 2019, there were over 3,611 heat related emergency department visits in North Carolina. A Heat Prevention Specialist in Scotland County is working with NCDHHS/Division of Public Health, Occupational & Environmental Epidemiology Branch to educate the public (elderly and student athletes) about Heat-Related Illness.

Animal Control:

The Animal Control Program of the Scotland County Health Department is charged with the responsibility of enforcing state and county laws, ordinances, and resolutions pertaining to the care, custody and control of county animals.

In **F/Y 2018-2019**, the North Carolina State Laboratory confirmed no positive cases of rabies in Scotland County. Rabies is transmitted from one animal to another and from animals to people. Officials ask citizens to stay aware and have their animals vaccinated by a licensed veterinarian. Scotland County Animal Control during (F/Y 2018-2019) had **2,114** animal control calls; **105** animal control ordinance violations (loose or tethering); **22** animal bite investigations and **781** animals impounded.

The City of Laurinburg has one Animal Control Officer who provides services within city limits and enforces city ordinances and state laws.

Scotland County's Animal Shelter is responsible for providing temporary care, housing and adoption services for unwanted, owner-relinquished, and lost pets including cats and dogs. Shelters provide a variety of services that promote the humane treatment of animals in Scotland County. Scotland County is ranked **38th of 100 counties** in Animal Shelters per capita, and **48th of 100 counties** in Animal Shelters per square mile.

Transportation

Transportation continues to play a vital role in the health and well being of Scotland County residents since "transportation" enables or diminishes access to services such as health care, as well as access to employment, school, day care, and more. Scotland County Area Transit System (SCATS) has eleven public transportation vehicles. These can be used by eligible Medicaid clients and the general public to go to pharmacies and medical appointments within the City of Laurinburg and in Scotland County. Scotland County Area Transit System (SCATS) continues to respond and serve the transportation needs for programs such as Work First, the Division of the Blind, Council of Government Council on Aging clients over age 60, Medicaid recipients, and the elderly and disabled population. The system also continues to transport clients to Moore Regional Hospital, UNC Medical Center, and Duke Medical Center for medical appointments, and to various clinics, pharmacies, and medical services not available in Scotland County.

The SCATS system maintains two fixed routes serving approximately 1,800 to 2,000 passengers monthly. The Red Line Route serves East Laurinburg and the north side of Laurinburg. The Blue Line Route serves the north and east side of Laurinburg with several stops on the southern end of town. The two routes (the Blue Line and the Red Line) have several common stops that allow riders to transfer from one line to the other to reach different areas of the community. Scotland County Area Transit System (SCATS) runs Monday through Friday from 8:00 am to 5:00 pm and costs \$1.00 per person per day.



Recreation

Recreation and leisure are important aspects of life in Scotland County. Parks and playgrounds, festivals and football games, fishing and canoeing on the Lumber River, small lakes, golfing on two public courses and a private country club course, fitness activities and sports for youth, and numerous entertainment opportunities for the entire family are only the beginning. Scotland County is home to the popular John Blue Cotton Festival, held annually in October on the grounds of the historic John Blue House. The festival celebrates the contributions and innovations of those who lived the rural Southern farm life more than 100 years ago. Other opportunities include outdoor concerts such as Laurinburg after Five, ENCORE! Community Theatre, the Kuumba Festival celebrating the county's African American heritage, the Storytelling and Arts Center featuring renowned events such as the Boldface Liar's Showdown, and the renowned Highland Games with the sounds of wailing bagpipes are familiar to many community gatherings, symbolizing the county's strong Scottish heritage.

Scotland County Parks and Recreation's mission is "to actively encourage, provide and promote quality leisure, recreation and cultural opportunities, facilities and environment which are essential to the health and enhancement of the lives of our citizens." Quality of life is addressed by the park system and summer programs offered. Adult and youth sports are a strong component of the Parks and Recreation offerings with over 1,550 youth ages 5 to 15 participating each year. A new comprehensive guide to summer programs is now available to citizens of Scotland County through Parks and Recreation. Scotland County is home to 16 area parks, some with walking trails and maps available to the public. The **James L. Morgan Recreation Complex** is home to four baseball fields (for games and tournaments), five soccer fields, a disc golf course, and a "Splash Pad" which opens late spring through Labor Day Weekend for children of all ages.

The NC Division of Aging projects 53% of Scotland County's population will be 60 years of age or older by 2035. **Scotland Place Senior Civic Center**, strives to enrich the lives of Scotland County adults age 55 and over through programs and services that will improve their health and wellness, decrease their loneliness and isolation, as well as provide social, economic and educational opportunities that enhance their quality of life. The "Senior Center" is home to most of the activities and provides numerous year-round opportunities for aerobic exercises, Bingo, dancing, group meals, bus trips, movies, basket weaving and woodcarving to name a few. The evidence-based American Arthritis Foundation Exercise class "A Matter of Balance" provides structured programs with confirmed benefits, along with a Grandparent Support Group that addresses the needs of grandparents raising children. Senior Games draw in the older generation to try their hand at various sports, which include horseshoe throwing, basketball throwing, shuffleboard, and swimming.

The **Wagram Recreation/Active Living Center** became the multi-purpose senior center for Scotland County in March 2014 expanding services and programs for all generations providing activities to increase physical activity. The Parks and Recreation Advisory Board and Recreation Foundation continue to plan for future recreational activities.



Wagram Recreation/Active Living Center



James L. Morgan Sports Complex

Scotland County Sheriff's Department: See **Crime Table** below for information relating to crime in Scotland County for the years 2008 through 2017.

Scotland County	Offense Category	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017
	Murder	8	10	6	7	7	4	4	5	6	6
	Rape	10	16	11	5	6	17	9	11	11	4
	Robbery	60	48	44	58	33	41	40	38	50	46
	Agg. Assault	116	130	121	98	141	218	173	174	192	196
	Burglary	830	735	790	781	812	791	729	745	765	566
	Larceny	847	859	727	896	901	683	622	658	523	505
	MV Theft	115	112	94	86	50	59	63	65	65	52
Total		1,986	1,910	1,793	1,931	1,950	1,813	1,640	1,696	1,612	1,375

(NC Department of Justice 2019 Data)

Emergency Medical Services

For 2019, Scotland County's Emergency Medical Service (EMS) reported 397 calls for traffic accidents and responded to 6,229 '911' calls. Following traffic accidents, the four leading calls to EMS were for:

Leading Calls	Number
Sick Person	1,001
Transfer/Interfacility/Palliative Care	683
Breathing Problems	440
Traumatic Falls/Back Injuries	432
Administered Narcan	91

Laurinburg Police Department: Through December 2019, the Laurinburg Police Department records show there were 41 reported arrests for DWI (Driving While Intoxicated) with 22 involving alcohol-related accidents with no fatalities.

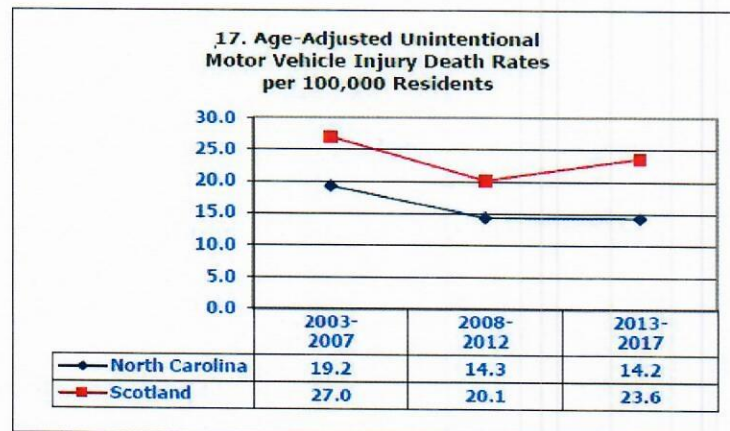
Highway Patrol – Scotland County

According to the North Carolina Department of Transportation, in a recent ranking of North Carolina counties with the most dangerous roads, Scotland County placed just inside the top tenth in the state. The state released county crash rankings with Scotland County ranking 11th in 2018 (6th in 2016 and 3rd in 2017). The report stated Scotland County averages 761 crashes annually (2014-2018) with an average of several fatal crashes per year. The average three year annual cost of accidents in Scotland County is approximately \$120,334,667 million.

According to the North Carolina Highway Safety Research Center, there were 5 traffic fatalities in Scotland County in 2018 with one involving alcohol, ten fatalities in 2017, and five in 2016.

Motor Vehicle Crash Deaths

From **2013-2017**, the age-adjusted unintentional motor vehicle injury death rate for North Carolina was **14.2** (per 100,000 population). Scotland County's rate for the same period was **23.6** (per 100,000 population). Below is a table depicting the trend in the age-adjusted unintentional motor vehicle injury death rates in Scotland County (per 100,000 population). (NC State Center for Health Statistics, 2019)



(NC Statewide and County Trends in Key Health Indicators 2013-2017)

Health Care Providers/Ratio

In terms of health care resources, in 2018 there were 18.3 physicians (per 10,000 population) in Scotland County compared to the North Carolina rate of 18.3 physicians (per 10,000 population); 84.4 Registered Nurses, 2.5 Dentists and 8.4 Pharmacists (per 10,000 population).

(North Carolina Department of Commerce/ACCESSNC Dec.2019)

Breakdown of medical doctors in Scotland County 2019 (by specialty) is:

Anesthesia	3	Occupational Medicine	0
Cardiology	3	Oncology	3.5 (Medical and Radiation)
Dermatology	1.5	Ophthalmology	1
Emergency Medicine	7	Orthopedics	5
ENT	1	Pathology	1
Family Practice	17	Pediatrics	4
Gastroenterology	0	Podiatry	0
General Surgery	4	Psychiatry	0
Internal Medicine	.5	Pulmonology	1
Hospitalist	8	Radiology	3
Nephrology	3	Urology	2
Neurology	.5	Vascular Surgery	2
OB/GYN	5		
			Total 76



Scotland Health Care System



Life Flight



Scotland Cancer Treatment Center

Section II

Scotland County Health Data

This section of the Community Health Assessment Report 2019 discusses health statistics from secondary data with respect to mortality, morbidity, teen pregnancy, births and deaths in Scotland County. Data is taken from the *North Carolina State Center for Health Statistics Data Book 2018* and the *North Carolina Vital Statistics 2018 Volumes 1 and 2*. Information from these sources allows us to compare information from Scotland County with similar information from our peer counties (Montgomery, Anson, Richmond, and Bladen) where indicated, and in North Carolina. The findings will help our community determine health priorities and concerns.

Mortality Statistics

In 2018, Scotland County's total death rate was 11.5 with 402 deaths (excluding fetal deaths) compared to North Carolina's rate of 9.1 (per 100,000 population). **Heart Disease** was the leading cause of death in Scotland County with **89** deaths for a death rate of 250.6 compared to North Carolina's death rate of 183.9 (per 100,000 population). The next five leading causes of death in Scotland County were: **cancer 83; cerebrovascular disease 25; chronic lower respiratory disease 23; Alzheimer's 10; diabetes 8; unintentional injuries 16; and motor vehicle injuries 11** (per 100,000 population). There were three suicide and five homicide deaths in the county. (North Carolina Vital Statistics, Vol. 1, 2, 2018).

The leading causes of death in Scotland County, our peer counties and North Carolina during the period **2014-2018** and their unadjusted death rates (per 100,000 population) were:

Disease	Scotland County Rate	Richmond County Rate	Bladen County Rate	Anson County Rate	Montgomery County Rate	North Carolina Rate
Heart	238.1	241.4	240.9	226.1	166.9	158.0
Cancer	252.8	180.5	165.8	174.9	159.0	161.3
Cerebrovascular (Stroke)	61.5	64.6	39.4	53.4	38.5	43.0
Diabetes Mellitus	32.2	44.2	39.0	34.2	31.5	23.7
Chronic Lower Respiratory	57.0	68.2	41.7	50.3	52.8	44.7
Unintentional Motor Vehicle	23.1	18.9	36.9	25.3	23.7	14.5
Other unintentional injuries	38.4	39.6	43.2	29.9	25.3	37.0
Alzheimer's	48.5	46.3	25.8	29.7	58.8	35.7
Chronic Liver Disease/Cirrhosis	17.1	16.5	9.2	15.9	n/a	10.4
Nephritis, Nephrosis	22.0	27.1	23.2	25.9	16.8	16.4
Pneumonia, Influenza	14.2	15.7	14.8	22.4	20.3	17.4
Homicide	16.1	11.2	16.8	19.8	n/a	6.5
Suicide	11.0	12.6	12.9	n/a	n/a	13.5
HIV	n/a	n/a	n/a	n/a	n/a	1.9
Total Death Rate-All Causes	915.5	1,008.7	918.4	999.6	809.3	781.8

(NC State Center for Health Statistics Vital Statistics Volume II, 2018)

Mortality Statistics Summary for 2017 (2014-2018)

Total Deaths - All Causes

Geographical Area	Number of Deaths 2018	Death Rate* 2018	Number of Deaths 2014-2018	Death Rate* 2014-2018
North Carolina	94,005	905.3	452,047	781.8
Scotland	402	1154.8	1,993	915.5

Heart Disease

Geographical Area	Number of Deaths 2017	Death Rate* 2017	Number of Deaths 2014-2018	Death Rate* 2014-2018
North Carolina	18,840	183.4	92,384	158.0
Scotland	95	270.7	434	196.9

Cancer - All Sites

Geographical Area	Number of Deaths 2017	Death Rate* 2017	Number of Deaths 2014-2018	Death Rate* 2014-2018
North Carolina	19,474	189.6	97,303	161.3
Scotland	86	245.1	460	199.8

Cerebrovascular Disease

Geographical Area	Number of Deaths 2017	Death Rate* 2017	Number of Deaths 2014-2018	Death Rate* 2014-2018
North Carolina	5,100	49.6	24,832	43.0
Scotland	14	39.9	107	49.6

Diabetes Mellitus

Geographical Area	Number of Deaths 2017	Death Rate* 2017	Number of Deaths 2014-2018	Death Rate* 2014-2018
North Carolina	2,908	28.3	14,170	23.7
Scotland	12	34.2	59	26.6

Pneumonia and Influenza

Geographical Area	Number of Deaths 2017	Death Rate* 2017	Number of Deaths 2014-2018	Death Rate* 2014-2018
North Carolina	2,079	20.2	10,024	17.4
Scotland	7	19.9	31	14.2

Alzheimer's Disease

Geographical Area	Number of Deaths 2017	Death Rate* 2017	Number of Deaths 2014-2018	Death Rate* 2014-2018
North Carolina	4,291	41.8	19,988	35.77
Scotland	19	54.1	91	41.6

Chronic Liver Disease and Cirrhosis

Geographical Area	Number of Deaths 2017	Death Rate* 2017	Number of Deaths 2014-2018	Death Rate* 2014-2018
North Carolina	1,274	12.4	6,265	10.4
Scotland	9	25.6	38	17.1

All Other Unintentional Injuries

Geographical Area	Number of Deaths 2017	Death Rate* 2017	Number of Deaths 2014-2018	Death Rate* 2014-2018
North Carolina	4,526	44.1	19,576	37.0
Scotland	15	42.7	73	39.1

Motor Vehicle Injuries

Geographical Area	Number of Deaths 2017	Death Rate* 2017	Number of Deaths 2014-2018	Death Rate* 2014-2018
North Carolina	1,519	14.8	7,553	14.5
Scotland	9	25.6	45	25.1

Suicide

Geographical Area	Number of Deaths 2017	Death Rate* 2017	Number of Deaths 2014-2018	Death Rate* 2014-2018
North Carolina	1,527	14.9	7,152	13.5
Scotland	5	14.2	20	11.0

Homicide

Geographical Area	Number of Deaths 2017	Death Rate* 2017	Number of Deaths 2014-2018	Death Rate* 2014-2018
North Carolina	689	6.7	3,217	6.5
Scotland	5	14.2	26	16.1

(NCDHHS/NCSCSHS 2020 Volume 2 – Leading Causes of Death)

Cancer Mortality Rates by Site: (2014-2018)

County	<u>Colon/Rectum</u> Deaths/Rate		<u>Lung/Bronchus</u> Deaths/Rate		<u>Female Breast</u> Deaths/Rate		<u>Prostate</u> Deaths/Rate		<u>All Cancers</u> Deaths/Rate	
Scotland	46	20.6	143	60.8	31	27.0	17	n/a	460	199.8
<i>Montgomery</i>	26	13.6	88	42.9	21	20.8	23	28.1	309	159.0
<i>Richmond</i>	47	15.5	148	47.8	31	21.1	24	20.5	533	180.5
North Carolina	8,097	13.6	27,132	44.1	6,880	20.9	4,654	19.7	97,303	161.3

(NC State Center for Health Statistics – NC Central Cancer Registry, Dec. 2019)

According to the *Health Profile of North Carolinians 2017* and other resources, the 10 leading causes of death were the same for North Carolina as in Scotland County. Cancer, Heart Disease, Stroke and Chronic Lung Disease are the leading causes of death in North Carolina. Chronic diseases account for 60 percent of all deaths in the state. There have been dramatic increases in diabetes and obesity in the past decade; these conditions exacerbate many other health problems. Many deaths in North Carolina are preventable and involve risky behaviors or lifestyles. Among the leading causes of preventable death are tobacco use, unhealthy diet and/or physical inactivity, alcohol misuse, firearms, sexual behavior, motor vehicles and illicit drug use.

Pregnancies and Infant Mortality

Teen Pregnancy

In **Scotland County**, there were **59** teen pregnancies in 2017 for 15 to 19 year olds and decreased to **46** pregnancies in 2018 for this age group. In 2018, the county rate was 46.2 compared to the NC state rate of 24.6 (per 1000 population). While many believe teen pregnancy is a growing problem, North Carolina's teen pregnancy rate is at an all-time low declining more than 69% since it peaked in 1990. However, Scotland County continues to have one of the highest teen pregnancy rates in NC and ranked 5th highest in the State in 2017 and 3rd highest in 2018. The breakdown of teen pregnancies from 2015 to 2018 follows:

Scotland Co.	10-14 yrs	w/m	15-19 yrs	w/m	n/w
2015	1	0/1	73	21/30	17
2016	1	0/1	55	11/28	16
2017	1	0/1	59	13/35	11
2018	0	0	46	14/20	12
2018 NC	#	#/#	8,255	3,048/4,942	127

2018 NC Teen Pregnancy (Ages 15-19) Peer County Rankings: Rate per 1,000

Montgomery Co.	18	Rate: n/a	Ranking: n/a
Vance Co.	73	Rate: 48.2	Ranking: 2nd
Bladen Co.	41	Rate: 42.1	Ranking: 9th
Scotland Co.	46	Rate: 46.2	Ranking: 3rd
Richmond Co.	61	Rate: 45.8	Ranking: 4th
Anson Co.	21	Rate: 29.9	Ranking: 29th

(NC DHHS NC State Center of Health Statistics and SHIFT NC 2018)

Infant Mortality

North Carolina health officials say infant mortality in the state decreased for the third year in a row in 2018. The Department of Health and Human Services released figures showing about 6.8 babies out of every 1,000 live births died before their first birthday. However, deaths attributed to Sudden Infant Death Syndrome (SIDS) in North Carolina continued a downward trend from 13 (2016), 9 (2017), to 3 in 2018 according to data by the State Center for Health Statistics (Sept. 2019).

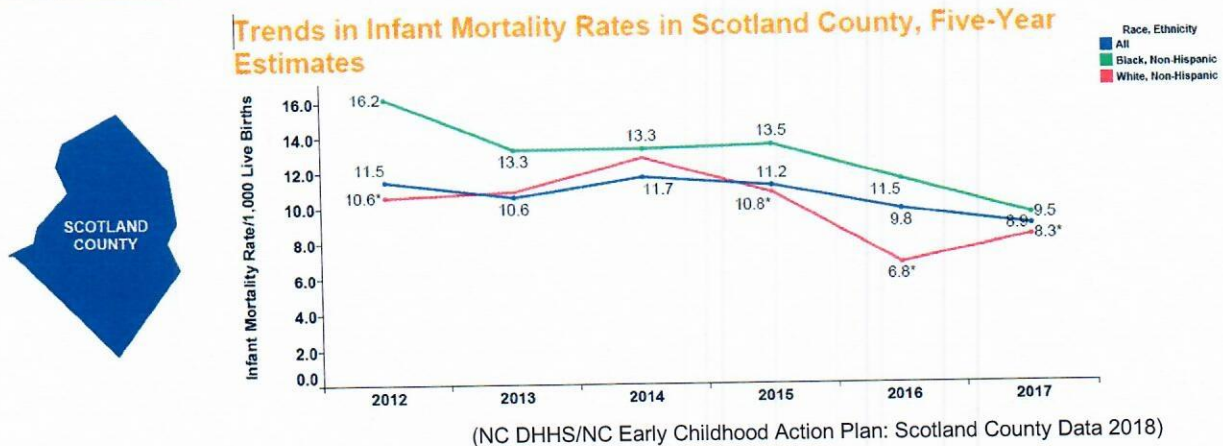
In **Scotland County** the infant death rate for the period **2014-2018** was 9.4 (per 1,000 population) compared to the state rate of 7.1 (per 1,000 population). In **2016**, four infant deaths were reported in Scotland County, a rate of 8.8 (per 1,000 population), compared to North Carolina's infant death rate of 7.1 (per 1,000 population). Scotland County's infant death rate in **2017** of 11.0 with 5 deaths, and in **2018**, three infant deaths were reported with a rate of 6.8 compared to the state rate of 6.8.

Infant Mortality	Year	White Rate	Minority Rate	Total Rate
Scotland County	2016	n/a	9.5	8.8
	2017	7.2	18.1	11.0
	2018	7.6	10.1	6.8
North Carolina	2016	5.0	13.4	7.2
	2017	5.0	12.5	7.1
	2018	5.0	12.2	6.8

(North Carolina State Center Health Statistics, 2018)

Scotland County Community Health Assessment 2019

Infant Mortality Rate Trends, Five Year Estimates



Communicable Diseases

A communicable disease is an infectious or contagious disease that can be transmitted from one person to another either directly by contact or indirectly by germs or parasites. Health professionals are required to report cases of certain communicable diseases to the NC Division of Public Health through their local health department. Scotland County Health Department works in collaboration with the NC Communicable Disease Branch on the following four objectives:

- To promptly investigate disease outbreaks and unusual situations and to implement control measures to minimize further transmission of disease
- To monitor disease-reporting by physicians and laboratories in order to detect trends and to assess the public health impact of diseases
- To provide a channel of communication between public health agencies, private physicians, and hospital and occupational infection control personnel, as an essential part of disease control efforts
- To explain public health interventions and disseminate health education messages to the community and the media in order to enhance disease control efforts

Sexually Transmitted Infection – (STI)

Also known as sexually transmitted diseases, most STI cases in Scotland County are prevalent in the age groups from 15 to 19 yrs (26.71%) and 20 to 24 yrs (32.93%). Our demographics show African Americans with the highest STD rate at 68.88%, White at 17.47% and American Indian at 8.84%. In 2018 there were 498 (341 female/157 male) reportable STIs in Scotland County.

Scotland County	2016	2017	2018
AIDS	0	1	6
HIV	4	3	3
Syphilis (P & S/E.L.)	9	3	7
Chlamydia	305	313	314
Gonorrhea	89	156	155

(2018 NC STD Surveillance Report)

Like our peer counties, chlamydia continues to be the most prevalent STI in Scotland County, in North Carolina and in the United States. The number of chlamydia cases diagnosed in North Carolina in 2018 was 66,763, a rate of 643.0 (per 100,000 population), an increase from 62,988 cases in 2017 (rate of 613.3 per 100,000 population). Among women, chlamydia diagnoses increased by 21%; among men, chlamydia

Scotland County Community Health Assessment | 2019

diagnoses increased 71% from 12,388 in 2014 to 21,184 in 2018; this may in part be due to increased screening among men.

Untreated chlamydia can lead to serious health outcomes, including increased risk for HIV, PID, and infertility. Additionally, Scotland County's Gonorrhea cases have increased over the past three years. The following is a table showing the number of specific STI cases including Primary and Secondary Syphilis and Early Latent Syphilis in our peer Counties from 2016 to 2018:

COUNTY	Chlamydia			Gonorrhea			P. & S. Syphilis			E.L. Syphilis		
	2016	2017	2018	2016	2017	2018	2016	2017	2018	2016	2017	2018
Anson	173	166	181	99	62	69	4	2	#	0	1	5
Bladen	232	150	159	76	44	66	0	1	2	1	4	4
Montgomery	118	112	109	37	25	40	2	1	0	2	3	1
Pasquotank	277	275	251	72	62	46	1	3	3	3	2	6
Richmond	426	367	286	74	99	85	1	2	1	6	4	6
Vance	560	451	444	233	142	193	9	2	7	10	15	17

(NCD3: NC Disease Data Dashboard 2019)

HIV/AIDS

As of December 31, 2018, there were 35,457 persons diagnosed and living with HIV in **North Carolina** and 16,030 persons diagnosed and living with AIDS. In **Scotland County**, there are **121** persons living with **HIV** and **61** persons living with **AIDS** ranking our county 4th in the state.

Also in 2018, 1,218 new diagnoses of HIV were reported in North Carolina, at a rate of 13.9 (per 100,000 pop.). Of the new infections, 1,218 infections occurred in the adult/adolescent population, with a rate of 10.3 (per 100,000 pop.), slightly less than previous years.

Persons 20 to 29 years old have the highest rates of newly diagnosed HIV. Among race, ethnicity and gender groups, Black/African Americans represented 63% of all adult/adolescent infections with a rate of 40.8 (per 100,000 pop.) (NC Electronic Disease Surveillance System, 2020)

Tuberculosis

Tuberculosis (TB) is a disease caused by bacteria that can damage the lungs or other parts of the body like the spine, lymph nodes or kidneys. If not treated properly, TB disease can be fatal. TB is spread through the air from one person to another when a person with active TB disease of the lungs or throat coughs, sneezes, speaks or sings. People nearby may breathe in these bacteria and become infected.

While tuberculosis in the United States decreased from 3.0 to 2.8 per 100,000 between 2014 and 2018, the North Carolina rate went from 2.0 to 1.9 (per 100,000). North Carolina reported 196 tuberculosis cases in 2018. The following table shows TB cases in North Carolina and our peer counties for 2016-2019:

COUNTY	2016		2017		2018		2019	
	Cases	Rate	Cases	Rate	Cases	Rate	Cases	Rate
Anson	0	0	3	11.5	2	7.6	n/a	0.0
Bladen	2	5.9	2	6.0	0	0.0	n/a	0.0
Montgomery	2	7.3	1	3.7	3	11.0	n/a	0.0
Richmond	0	0.0	1	2.2	3	6.7	n/a	0.0
Scotland	0	0.0	0	0.0	0	0.0	n/a	0.0
Vance	1	2.2	0	0.0	1	2.2	n/a	0.0
N. Carolina	219	2.2	213	2.1	196	1.9	n/a	0.0

(NC DHHS Epidemiology; NC TB Control Program; CDC – 2019)

Minority Health and Health Disparities

Data shows African Americans have higher death rates from HIV, homicide, cancer, diabetes, kidney disease, stroke and heart disease compared to whites and a higher incidence rate for Sexually Transmitted Infection.

Almost two-thirds of all new HIV diagnosis are among Black/African Americans. The increasing rates of HIV among Hispanic/Latinos and Black/African Americans can be attributed to socioeconomic issues, such as poverty, lack of information, misinformation and stigma about HIV, inadequate healthcare access and institutional racism. HIV rates are also highest in low income areas. (CDC 2019).

North Carolina's American Indian population has elevated death rates of heart disease, diabetes, kidney disease, homicide and unintentional motor vehicle crashes, as well as a substantially higher infant death rate, compared to non-Hispanic whites. These higher death rates for American Indians and African Americans reflect their high percentage living in poverty, lack of insurance and access to health care.

In North Carolina the African American infant mortality rate is more than twice the rate than for whites. The infant mortality disparity ratio of African American infant deaths compared to white infant deaths in Scotland County (2013-2017) was 1.1x higher and in North Carolina 2.4x higher.

Asthma impacts all North Carolinians, however, African Americans, Native Americans, women, persons 65 years and older, children under the age of five years, and persons living in households with an income less than \$15,000 are among the groups most affected by Asthma.

According to the North Carolina Housing Coalition (2019), 35% of all households in Scotland County are considered cost-burdened, meaning that 30% or more of their monthly income goes to housing costs/rent.

(Health Profile of North Carolinians 2017 Update/NCDHHS Chronic Disease and Injury Section 2017)



Section III

Primary Data Methodology

In the fall of 2018, a Community Health Assessment Team and Core Work Group were established to begin work on the 2019 Community Health Needs Assessment (CHNA) process. The core team included members from several community agencies, organizations, churches and community. This group met intermittently to discuss a timeline for survey distribution, data collection and analysis of survey results, data collection and analysis of secondary data, prioritization of health concerns, report development, dissemination of the final data and report, then developing action plans to cover the period 2019 through 2022.

The process included creating a comprehensive survey to collect local data from the community about their health concerns and other issues relative. Once the survey results were analyzed, the team met to identify the top five health concerns, narrowed to the top three priority health concerns, then, began identifying our community's strengths, resources and needs. The table below provides a list of individuals, agencies and roles during this process.

Name	Title	Agency	Role
Kristen Patterson	Health Director	Scotland County Health Department	Meetings; Analysis, Accreditation, Distribution
Kathie Cox	Health Educator II/PIO	SCHD and CHAB	Coordinator, data input, research, survey distribution, analysis, report development
Felicia Faison	WIC Director	SCHD	Core Work Group; meetings; data analysis; survey distribution;
Alisa Freeman	Nursing Supervisor	SCHD	Core Work Group; meetings, survey distribution
Donna Page	Director of Nursing	SCHD	Core Work Group; meetings, survey distribution
Savannah Simpson	Health Educator II and Preparedness	SCHD	Core Work Group; meetings, data input, survey distribution; Accreditation Coordinator
Jordon Nabors	Student Intern	UNC Pembroke	meetings, data research, survey distribution
Tim Martin	Fiscal Management Supervisor	SCHD	Core Work Group; meetings, survey distribution
Deborah Rogers		SCHD	Committee, meetings, survey distribution, technical assist
April Snead	Director	DSS	Committee, meetings, survey distribution, analysis
Tammy Holloway	Asst. Director	SHCS/Assoc. Health	Core Work Group, meetings, analysis
Dave Salzlein	VP Strategic Service	SHCS	Core Work Group, analysis, survey distribution,
Maggie McGee	Health Educator	SHCS/Comm Health	Core Work Group, meetings, data input, survey distribution
Lisa Hunt	Director	SHCS/Comm Health	CHAB, Core Work Group, meetings, data input, survey dist
Ivy McLaurin	Community Grants	SMH Foundation	Meetings, analysis, survey distribution
Kirsten Dean	Executive Director	SMH Foundation	Committee, meetings, survey distribution, analysis
Haley Powell	Early Childhood	SCPC&F	CHAB, meetings, survey distribution, analysis
Bryan Graham	Director	Parks & Recreation	Meetings, survey distribution, data analysis
Andy Kurtzman	Executive Director	SCHC	Committee, meetings, input, survey distribution, analysis
Dr. Melba McCallum	Director	Partners In Ministry	Meetings, input, survey distribution, data analysis
Noran Sanford	Director	Growing Change	Meetings, input, analysis, survey distribution
Jamie Synan	Coordinator/Student	School System	Committee, meetings, input, analysis, survey distribution
Darlene McDonald	BSN, School Nurse	SHAC	Committee, meetings, analysis, survey distribution
Summer Gainey	PhD, LCSW	UNCP	Committee, meetings, analysis,
Karen Laviner	Deputy Director	Housing Authority	Meetings, analysis, survey distribution
Roylin Hammond	Emergency Mgmt	EMS	Committee, meetings, survey distributions
Sharon Armstrong	Director	DVRCC	Meetings, analysis, survey distribution
Andrea Fields	Director	Vocational Rehab	Committee, meetings, survey distribution, analysis
Tracy Page	Director	Medical Records	Data input
		SMH	
Community:			Participants attended meetings, Survey distribution; Provided input for survey and analysis
Wm. Matthews	Faith Community	Board of Health	Agencies Contributing: Community Health Advisory Board, Cooperative Extension, Scotland County School System, Scotland Health Care System, Board Of Health, Ministerial Alliance Association, DSS, Growing Change, Scotland County Partnership for Children & Families, Laurinburg Housing Authority, Partners In Ministry, Domestic Violence and Rape Crisis Center, Scotland County Parks & Recreation, Scotland Community Health Clinic, Cooperative Extension, UNCP, WLNC, WEWO,
Dorothy Tyson	Faith Community	WLNC Radio	
Essie Davis	Community	Autism Society	
Walter Brown	Community	Community	
Sharon English	Community	Coop. Extension	
Gary Gallman	Community	WLNC Radio	
Mary Evans		WEWO Radio	

After several meetings and revisions of the proposed CHNA survey, a final draft was approved by the CHNA Team for distribution. The CHNA Survey was divided into four sections: health information applying to individuals, health information applying to family/household, health information that applies to the community in which participant lives, and a demographic section - designed to distinguish opinions on issues that impact the *community* from issues that impact *families*.

Staff and community volunteers from the Community Health Advisory Board and the CHNA Team personally distributed and collected the surveys in all areas of Scotland County. Paper copies of the survey were made available at places of business, various agencies, the Library, health department, the faith communities and hospital for participants. The survey was also made available on Survey Monkey for participants who preferred using internet however there were limitations in that the program only allowed one response per question, while multiple responses may have been included in the hard copy surveys. Every attempt was made to collect data randomly from all communities in the county and all ethnic groups. Nearly 600 surveys were completed both electronically and via hard copies and two focus group sessions were held along with 66 surveys from an adolescent population. The CHNA Survey questionnaire, comprehensive graphical data and community resources are located in the Appendices.

In brief, results of the survey showed that:

- **Heart Disease, Cancer, homicide/violence, diabetes and drug use** were felt to be the leading causes of death.
- The priority health issues were **high blood pressure, diabetes, heart disease, drug and alcohol abuse, gangs/violence and obesity**.
- The priority risk factors were **lack of physical activity, use of tobacco products, poor nutrition, substance abuse and unprotected sex**.
- **Lack of insurance, inability to pay, fear, no appointments available when needed and transportation** were the leading factors affecting families seeking medical treatment.
- **Economic, health insurance, literacy, crime, lack of transportation** were general concerns among respondents.
- Respondents wanted to see more education on **chronic disease prevention, mental health, sexually transmitted diseases, positive youth activities, wellness services and physical activity**.
- **Safe places to walk and play, healthier food choices** were environmental concerns.
- Respondents most wanted to see more **job opportunities, after school programs, recreation facilities, dental services, substance abuse rehabilitation and mental health services** to help improve the health of their communities.
- Respondents also indicated they **support tobacco-free public places/buildings in Scotland County**.

Community Health Assessment Opinion Survey Information Results

In **Section I** of the survey, participants were asked questions related to their concerns about their individual health issues **Section II** questions were related to family and **Section III** were related to community. Below are highlights: The CHA Survey and graph data can be found in the Appendices.

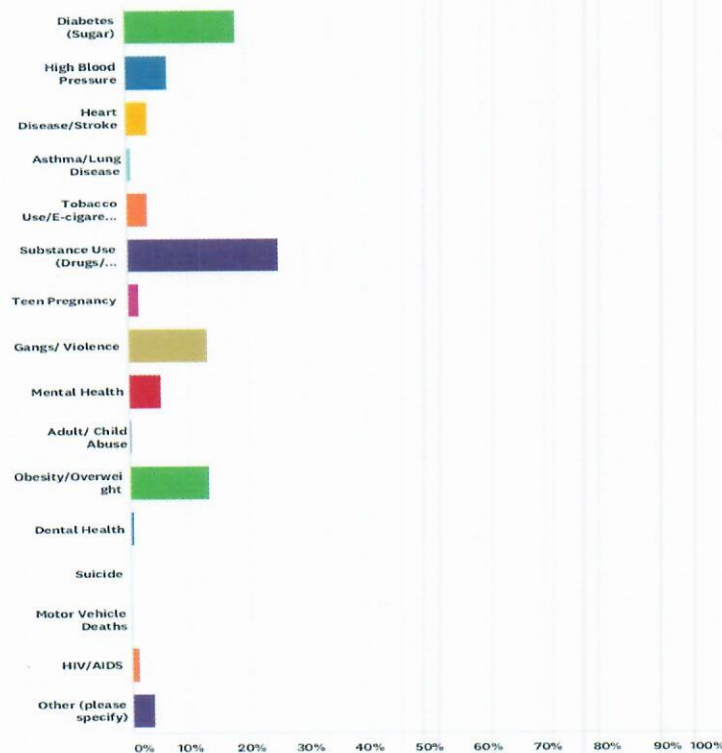
- In general, health issues the respondents felt had the biggest impact on for them were very similar to the health issues that impacted the respondent's *family* and *community*. The same held true for behavior risk concerns.
- Respondents listed drug/alcohol use, diabetes, obesity, gangs/violence and hypertension as their top 5 answers when asked what, in their opinion, was the leading cause of death in the community
- When the respondents' opinions were compared with the statistical data listed in the North Carolina Center for Health Statistics for Scotland County (2014-2018), there were differences. Heart disease is the leading cause of death followed by cancer, cerebrovascular disease (stroke), diabetes, respiratory, motor vehicle, and other unintentional injuries.

Scotland County Community Health Assessment | 2019

- Survey respondents indicated substance use/drugs, violence and diabetes as the leading causes of death in Scotland County however, according to the North Carolina Center for Health Statistics diabetes is the 4th leading causes of death in Scotland County. (SCHS, 2019)
- From the survey, 25.54% (17.1% in 2016) of the respondents felt substance use/drugs was the biggest health issue affecting the *community*. This was followed closely by diabetes, gangs and violence, then overweight/obesity.

Q18 In your opinion, what is the biggest health issue/ concern in your community?

Answered: 513 Skipped: 86



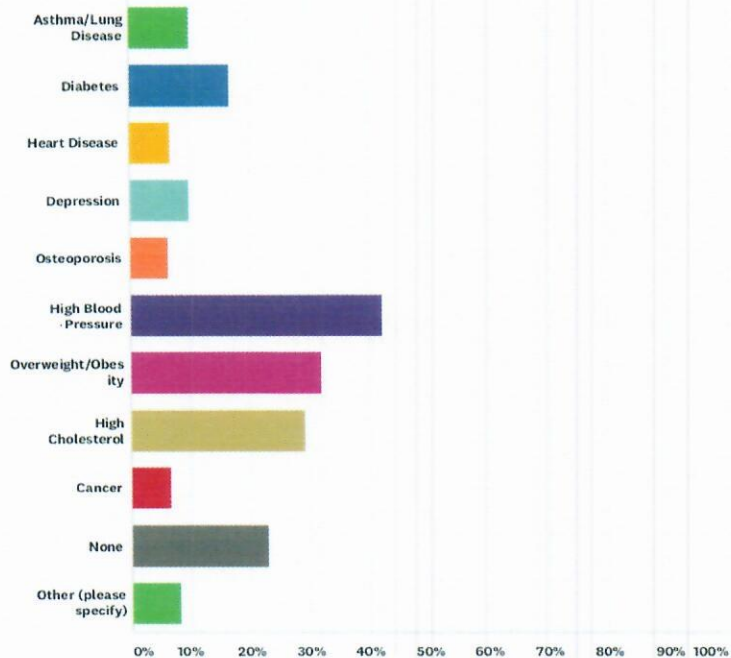
ANSWER CHOICES	RESPONSES
Diabetes (Sugar)	18.91% 97
High Blood Pressure	7.21% 37
Heart Disease/Stroke	3.70% 19
Asthma/Lung Disease	0.78% 4
Tobacco Use/E-cigarettes (Vaping)	3.51% 18
Substance Use (Drugs/ Alcohol)	25.54% 131
Teen Pregnancy	1.95% 10
Gangs/ Violence	13.45% 69
Mental Health	5.46% 28
Adult/ Child Abuse	0.39% 2
Obesity/Overweight	13.45% 69
Dental Health	0.58% 3
Suicide	0.00% 0
Motor Vehicle Deaths	0.19% 1
HIV/AIDS	1.17% 6
Other (please specify)	3.70% 19
TOTAL	513

(Community Health Assessment 2019)

- Given the same choices of health issues affecting them *individually*, 42.28% respondents listed high blood pressure as the leading health issue followed by overweight/obesity, high cholesterol unlike the choices as those impacting the community.

Q5 Have you been told by a doctor, nurse, or health professional that you have any of the following? (Check all that apply)

Answered: 589 Skipped: 10



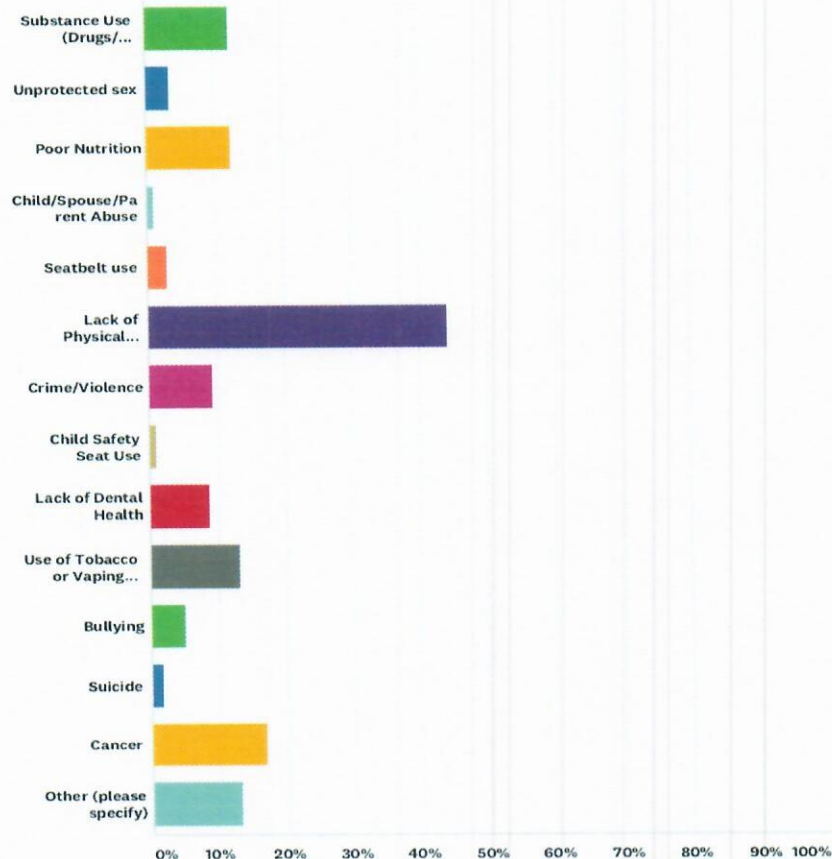
ANSWER CHOICES	RESPONSES
Asthma/Lung Disease	10.19% 60
Diabetes	16.98% 100
Heart Disease	6.96% 41
Depression	10.02% 59
Osteoporosis	6.45% 38
High Blood Pressure	42.28% 249
Overweight/Obesity	31.92% 188
High Cholesterol	29.20% 172
Cancer	6.62% 39

(Community Health Assessment 2019)

- When asked the behavior risk factors that impact their *families*, the leading response – 44.6% (39.9% in 2016) was lack of physical activity. This was followed by 12.53% (19.8% in 2016) poor nutrition, 13.7% (17.7% in 2016) for use of tobacco products, 12.31% (17.1% in 2016) for alcohol and drug abuse, 9.5% (9.8% in 2016) for crime/violence, 13.7% environmental factors, 1.8% for child/spouse/parent abuse (10.2 in 2016), and 3.46% for unprotected sex (12.3% in 2016). 4.9% of the respondents listed bullying as the leading behavior risk impacting their *family*.

Q14 What are the biggest behaviors/risk factors that impact your family? (Check all that apply)

Answered: 463 Skipped: 136

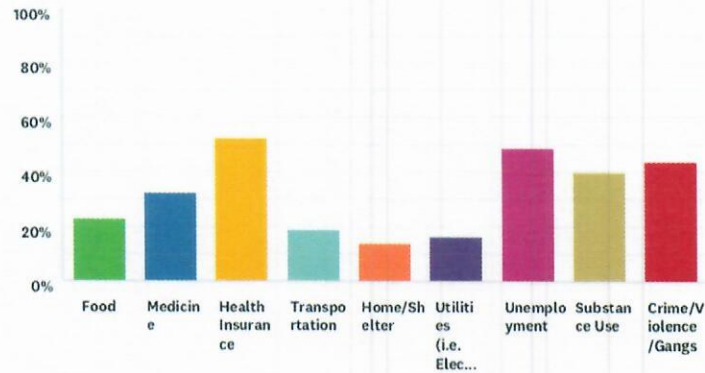


(Community Health Assessment 2019)

- When asked what the main reason that keeps *you or your family* from seeking medical treatment, 68.9% indicated none (36.2 in 2016), 10.4% (24.6% in 2016) indicated lack of insurance/inability to pay or doctor visit and 9.4% (15.9% in 2016) indicated unable to pay for visit to doctor. The next leading indicators for not seeking medical treatment were: fear of finding out about a health problem 1.1%, 2% no appointments available when needed, and no transportation 1.5%.
- When asked what factor most affects the quality of health care for people in your *community*, 80.8% (49% in 2016) felt the economy (low income, no insurance, etc.) was the leading response followed by 12.3% race, 19.3% (12.6% in 2016) ability to read and write/education and age at 11% (11.7% in 2016).
- When asked what people in their *community* lacked funds for, the leading response was Health Insurance at 52.5% (41% in 2016), followed by unemployment 49%, crime/violence 44%, substance use 39.9%, medicine 32.2% (21.5% in 2016), food 22.8% (8.4% in 2016), transportation/fuel 18.9% (11.5% in 2016), utilities (electricity, water, gas) 16.7% (9.4% in 2016), and shelter at 13.9% (6.8% in 2016).

Q20 What do you feel are the top three issues in your community due to lack of money? (Check three)

Answered: 508 Skipped: 91



ANSWER CHOICES	RESPONSES	
Food	22.83%	116
Medicine	32.28%	164
Health Insurance	52.56%	267
Transportation	18.90%	96
Home/Shelter	13.98%	71
Utilities (i.e. Electricity, Fuel, Water)	16.73%	85
Unemployment	49.02%	249
Substance Use	39.96%	203
Crime/Violence/Gangs	44.09%	224
Total Respondents: 508		

(Community Health Assessment 2019)

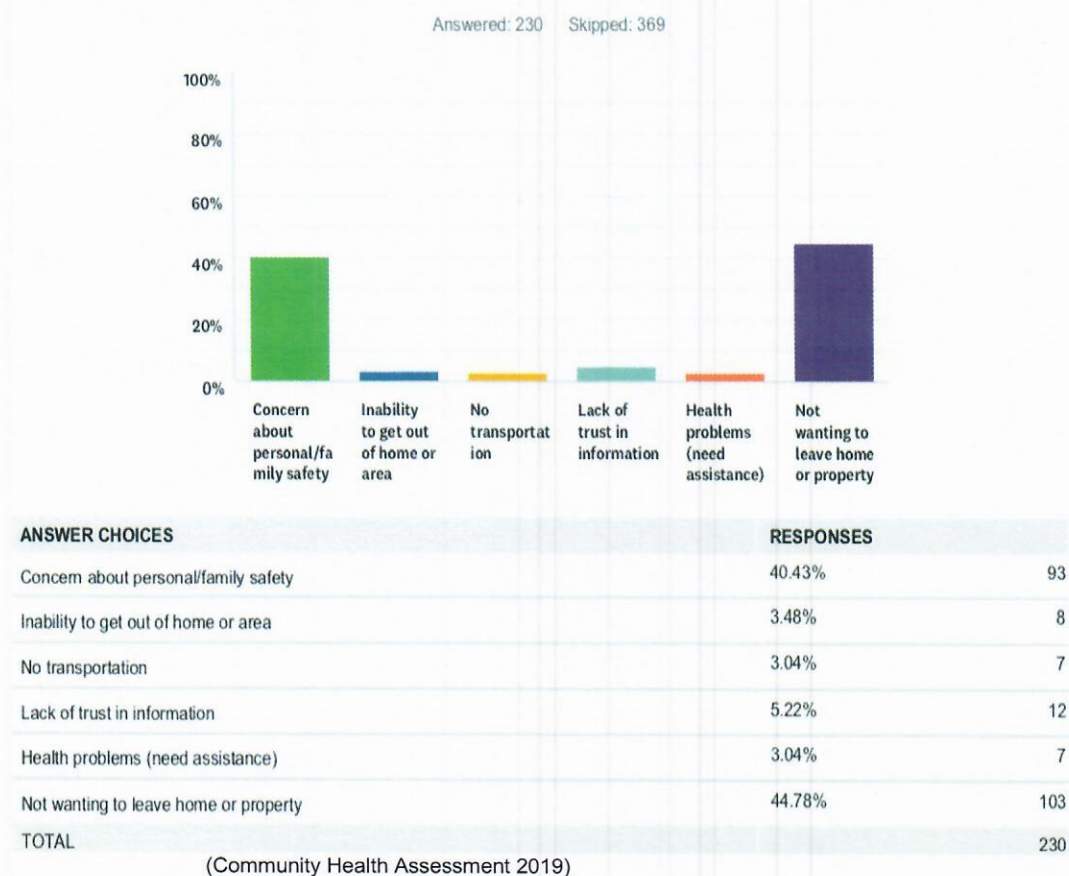
- Respondents indicated the education or information they would like to see more of in Scotland County were for: (CHA survey results) (shown is trend data since 2009 for five of the responses).

Education or Services for:	2019	2016	2013	2009
Alcohol/Drug Abuse	37.9%	32.4%	38.9%	28.8%
Teen Pregnancy Prevention	n/a%	18.6%	44.5%	17.9%
Blood Pressure	24.2%	23.6%	53.3%	14.1%
Heart Health	n/a%	n/a%	n/a%	13.4%
Physical Activity	44.0%	35.6%	38.9%	13.2%

- When asked what respondents would like to see more of to improve the health of family, friends and neighbors in Scotland County, over half listed mental health services 54.3% (42.5% in 2016), followed by job opportunities 48.8% (47% in 2016), positive youth activities 48.6%, safe places to walk/play 44% (42.8% in 2016) and recreation facilities 38.2% (35.6% in 2016). Other responses were in the areas of substance abuse/drug rehabilitation 37.9% (32.4% in 2016), wellness screenings 31.1% (21.8% in 2016), healthy food choices 30.9% (35.1% in 2016), and after school programs 34.9% (33.5% in 2016).

- When asked would you be likely to evacuate due to a large-scale disaster or emergency, 69.7% responded yes and 30.2% responded no. When asked what is the main way of receiving information from authorities in a disaster or emergency, respondents indicated television – 38.8% (34.5% in 2016) followed by text messages (Emergency Alert System) –33.1% (21.3% in 2016), radio – 12.3% (14.9% in 2016), 11.3% social media (9.6% in 2016). In addition, 36.6% of the respondents (45% in 2016) indicated the family did NOT have a basic emergency supply kit.

Q11 If you answered no to the previous question, please specify why?

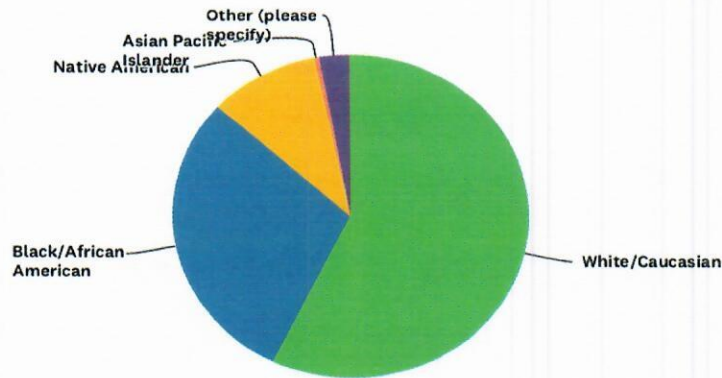


Demographic Information

- Geographical distribution of the surveys were predominantly from the county seat of Laurinburg 335 (55.8%). The towns of East Laurinburg, Gibson 12 (2.0%), Laurel Hill 45 (7.5%), Maxton 18 (3.0%) and Wagram 23 (3.8%) were also represented.
- Of the 516 participants who responded, 409 (79.2%) were female, 102 (19.7%) were male, 3 were LGBTQ+ (0.58%) and 2 were transgender (0.39%).
- Race breakdown: White 57.2%, Black 29.4%, Native American 10.1%, Asian/Pacific Islander 0.4%, and Other .04% Ethnicity: Hispanic 1.5% Not Hispanic 90.2% Unknown 8.2% (Community Health Assessment 2019)

Q27 My race is:

Answered: 503 Skipped: 96



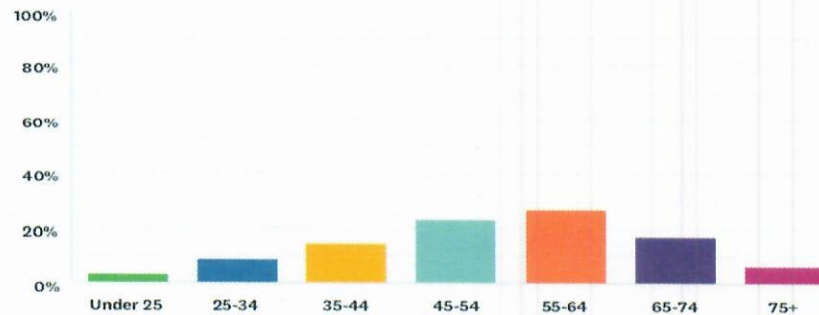
ANSWER CHOICES	RESPONSES	
White/Caucasian	57.26%	288
Black/African American	29.42%	148
Native American	10.14%	51
Alaskan Native	0.00%	0
Asian Pacific Islander	0.40%	2
Other (please specify)	2.78%	14
TOTAL		503

(Community Health Assessment 2019)

- Age breakdown for respondents:

Q23 My Age is:

Answered: 511 Skipped: 88



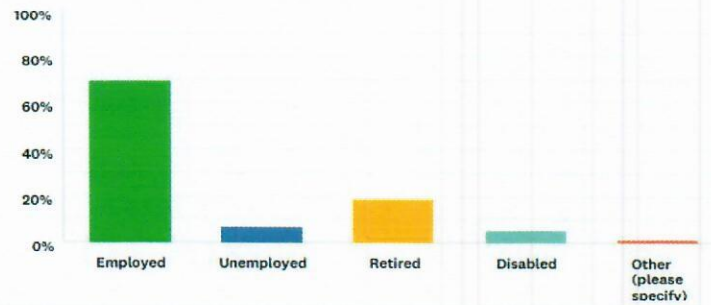
ANSWER CHOICES	RESPONSES	
Under 25	3.33%	17
25-34	8.81%	45
35-44	14.48%	74
45-54	23.09%	118
55-64	26.81%	137
65-74	17.03%	87
75+	6.46%	33
TOTAL		511

(Community Health Assessment 2019)

- Employment: The number of respondents employed 69.1%; Unemployed 6.3%; Retired 18.3%, Disabled 4.7%, Other 1.3%

Q29 I am:

Answered: 502 Skipped: 97



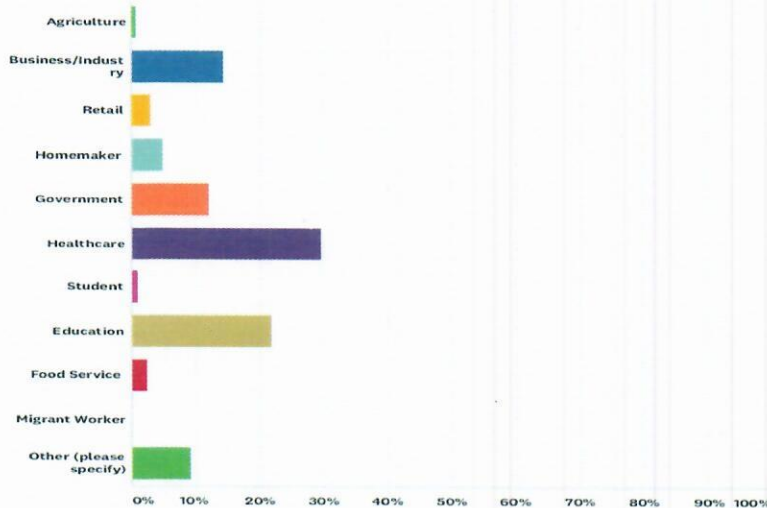
ANSWER CHOICES	RESPONSES	
Employed	69.12%	347
Unemployed	6.37%	32
Retired	18.33%	92
Disabled	4.78%	24
Other (please specify)	1.39%	7
TOTAL		502

(Community Health Assessment 2019)

- Respondents job fields:

Q33 My job field is best described as:

Answered: 472 Skipped: 127

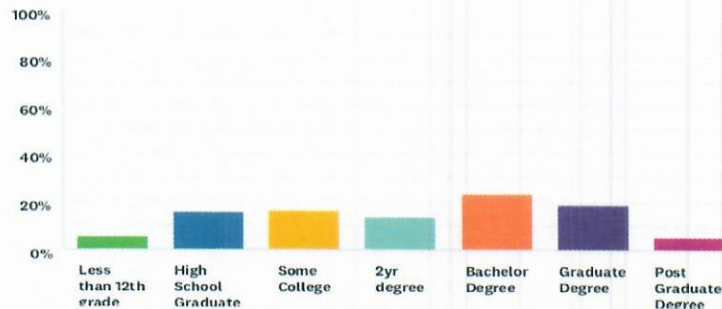


ANSWER CHOICES	RESPONSES	
Agriculture	0.85%	4
Business/Industry	14.41%	68
Retail	3.18%	15
Homemaker	5.08%	24
Government	12.08%	57
Healthcare	29.66%	140
Student	1.06%	5
Education	22.03%	104
Food Service	2.54%	12
Migrant Worker	0.00%	0

- Survey respondents were asked to indicate their level of education. The following graph shows responses with the majority having at least a high school degree:

Q31 My Highest level of education completed:

Answered: 510 Skipped: 89



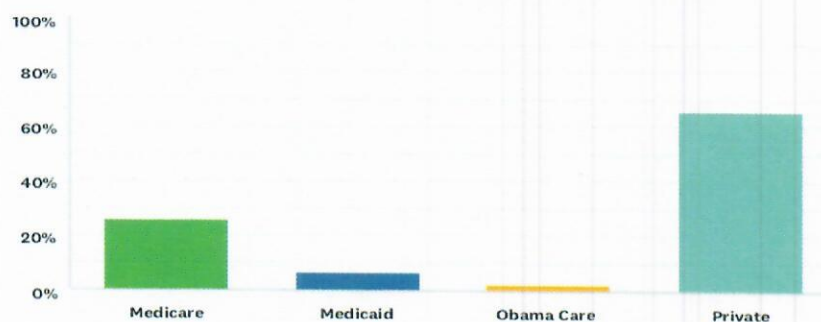
ANSWER CHOICES	RESPONSES	
Less than 12th grade	5.49%	28
High School Graduate	15.88%	81
Some College	16.67%	85
2yr degree	13.92%	71
Bachelor Degree	23.53%	120
Graduate Degree	18.82%	96
Post Graduate Degree	5.69%	29
TOTAL		510

(Community Health Assessment 2019)

- Survey respondents were asked if they had health insurance and if so, what kind of insurance. Yes 91.4%; No 8.5%. The majority of respondents indicated they had private insurance 65.6% followed by Medicare 25.8%, Medicaid 6.4%, and Obamacare 2.1%. The following graphs show responses:

Q25 If you answered yes to the previous question, what type?

Answered: 469 Skipped: 130



ANSWER CHOICES	RESPONSES	
Medicare	25.80%	121
Medicaid	6.40%	30
Obama Care	2.13%	10
Private	65.67%	308
TOTAL		469

(Community Health Assessment 2019)

Section IV

Health Issues and Resources

Chronic Disease

- High Blood Pressure
- Diabetes
- Cancer
- Overweight/Obesity
- Heart Disease/Stroke
- Asthma
- Obesity

Other Health Issues – Resources and Programs

- Child Health
- Communicable Disease
- Dental Health
- Environmental Health
- Hearing/Vision Health
- HIV/AIDS/STD
- Influenza/H1N1 Influenza
- Mental Health/Depression/Suicide
- School Health
- Women's Health

"The Healthy North Carolina 2020 objectives recognize the important role that social determinants play. According to the 2019 edition of *America's Health Rankings*, North Carolina ranked 36th in the nation". The burden of premature morbidity and mortality reflected in our ranking highlights the need for improvements in population health. More than two-thirds of all deaths annually in North Carolina are attributed to chronic diseases and injuries. The North Carolina State Center for Health Statistics listed the top five causes of death in 2018 as Heart Disease, Cancer, Stroke, Diabetes and Chronic Lower Respiratory.* Income level, education attainment status and quality of housing all contribute to health status and ultimately to life expectancy. Individuals dealing with the challenges of poverty are more likely to engage in risky behaviors that negatively impact health outcomes. Physical and economic environments also impact health behaviors and health outcomes. Scotland County is designated as a Tier One County – one of the most economically distressed in North Carolina and ranks 99 for health outcomes and 97 for health behaviors*.

*(NCDHHS) – North Carolina Department of Health and Human Services; Healthy North Carolina 2020 Update (May 2019); *America's Health Rankings*, 2019. North Carolina Institute of Medicine; North Carolina Department of Commerce and Robert Wood Johnson County Health Rankings 2019.

Scotland Health Care System



High Blood Pressure (Hypertension)

High blood pressure affects about 65 million or one in three American adults. Hypertension can lead to stroke, heart failure, or kidney damage. According to the North Carolina State Center for Health Statistics 2019, the number of deaths in Scotland County (2017) for heart disease was 95 and 14 deaths for cerebrovascular disease. Hypertension should be monitored through a physician with regular blood pressure screenings. Increased physical activity and healthy eating are also important steps to preventing high blood pressure as well as maintaining a healthy weight. (NCSCHS, 2019)

Blood pressure screenings and/or education are often provided through community health fairs, business and industry health screenings, the health department, Emergency Medical Service (EMS), local pharmacies, at the hospital, and on the hospital's mobile health unit.

42.2% of respondents reported High Blood Pressure as the biggest health issue in their family. Source: 2019 Scotland County Community Health Assessment Survey.

Diabetes Mellitus

Diabetes is a major cause of death and disability in North Carolina and the Nation. With a greater prevalence of obesity and an increasing elderly population, diabetes is approaching epidemic proportions in North Carolina. Approximately 13.1% of North Carolina's adult population has diagnosed diabetes. (The Burden of Diabetes in NC/American Diabetes Association 2015).

In Scotland County, diabetes was listed as the sixth leading cause of death in 2017. Diabetes, diagnosed as the primary cause of mortality, from 2014-2018, ranked Scotland County fifty-first highest in North Carolina with a rate of 33.5 (per 100,000 population) compared to the rate of 27.9 (per 100,000 population) for North Carolina. Diabetes is also a significant contributing factor to other causes of death, such as heart disease, stroke, and kidney failure with risk factors of obesity, physical inactivity, unhealthy diets and smoking.

Diabetes is costly. It is estimated that the cost of diabetes for people in North Carolina in 2018 was \$10.9 billion. This estimate includes excess medical costs of \$8.4 billion attributed to diabetes, and lost productivity valued at \$2.5 billion. (NCSCHS, DHHS 2018). On average persons with diabetes have approximately 2.3 times higher medical costs than those without diabetes.

Scotland County Health Department, through physician referral, provides an MDPP "Prevent Type 2" twelve month diabetes education program to eligible participants, in collaboration with FirstHealth, that includes assessment, education and follow up; collaborates with Scotland Health Care System in providing a monthly Community Diabetes Support Group Program, which includes education, presentations and often screenings. Annually, a community-wide Diabetes Health & Education Fair is held in November with approx. 120 participants, exhibitors and a panel of experts on diabetes sharing their expertise on a variety of relative topics.

The Medicine Shoppe offers individual consultations and/or screenings for diabetics through their Diabetes Care Center.

Scotland Community Health Clinic provides free quality primary medical care including Diabetes Management to residents of Scotland County between ages of 18 to 64 who are without any health insurance and below 200% federal poverty level. Screenings for chronic disease, including diabetes are provided

16.9% of respondents reported Diabetes as the biggest health issue in their family. Source: 2019 Scotland County Community Health Assessment Survey.

Cancer:

In 2017, Cancer was the second leading cause of death in North Carolina and in Scotland County with 19,474 and 86 deaths respectively. The majority of cancer deaths occur at four sites: lung, colon, female breast, and prostate. For 2014- 2018, Scotland County's cancer deaths by site were: lung - 143, female breast - 31, colon - 46 and prostate – 17 (NCSCHS 2019). Smoking by far is the leading risk factor for developing lung cancer. Other risk factors include

poor nutrition and lack of physical activity. Eating a healthy diet and being active can reduce the risk of developing cancer.

Scotland County is home to a state of the art Scotland Cancer Treatment Center located at Scotland Memorial Hospital, where clinical trials, genetic counseling, chemotherapy and radiation are provided. Scotland Cancer Treatment Center also has a new linear accelerator, used to provide radiation therapy. The accelerator allows more accurate views of a patient's treatment area in real time, IMRT – an advanced mode of high-precision radiotherapy, and IGRT – which helps manage motion caused by breathing, heart and gastric motility, and tumor and patient changes. In **2018**, the Cancer Treatment Center provided 214/153 Radiation Treatment/Total New Patient Consultations and 551 Medical Oncology & Hematology (new patient consultations); in **2019**, provided 219/178 (Radiation Treatment/Total New Patient Consultations) and 558 Medical Oncology & Hematology (233 Medical Oncology ONLY consultations).

Scotland Memorial Foundation provides funding for mammograms for low income women without resources for care, along with other screenings during community events.

Scotland County Health Department provides cervical cancer screenings through Adult Health, Family Planning programs, providing services to over 90 clients FY 2017-2018 and 102 clients FY 2018-2019.

6.6% of respondents reported Cancer as the biggest health issue in their family. Source: 2019 Scotland County Community Health Assessment Survey.

Heart Disease:

Heart disease and stroke – the principal components of cardiovascular disease – are the first and third leading causes of death for both men and women. Heart disease attributed to 18,467 deaths in North Carolina in 2015, and 89 deaths in Scotland County. (NCSCHS, 2015). While high blood cholesterol, high blood pressure, smoking and physical inactivity are considered four major risk factors, several other factors such as obesity and diabetes are also considered risk factors.

Scotland Health Care System opened their Scotland Cardiovascular Center, a joint venture with FirstHealth of the Carolinas in 2011. The center offers cardiac catheterizations and vascular procedures in a state-of-the-art facility and also offers inpatient and outpatient cardiology services, a cardiac/pulmonary rehabilitation center where supervised exercise, nutrition, stress management, vocational assessment and cardiovascular education are provided, and screenings for high blood pressure and cholesterol.

Scotland Memorial Foundation supports community cholesterol and blood pressure and other screenings through the Health Care System's Mobile Health Care Units "Scotty" and "Missy" and during community events or programs.

Scotland County Health Department and EMS provides blood pressure screenings on site for the community. Scotland County Healthy Carolinians continues to provide education and supports efforts on heart disease initiatives.

6.9% of respondents reported Heart Disease as the biggest health issue in their family. Source: 2019 Scotland County Community Health Assessment Survey.

Asthma

Asthma currently affects approximately 9.2 percent of adults and approximately 10 percent of children in North Carolina. Uncontrolled asthma can impose serious limitations on daily life. Asthma is a chronic, respiratory condition that affects the airways (bronchial tubes) in the lungs that make breathing difficult, or cause other symptoms such as coughing, wheezing, chest tightness, and shortness of breath and is the most common chronic disease in school aged children.

Asthma impacts all North Carolinians; however, African Americans, Native Americans, women, persons 65 years and older, children under the age of five years, and persons living in households with an income less than \$15,000 are among the groups most affected by asthma. (NC DHHS Chronic Disease and Injury Section 2019; NC Child Health Report Card 2018)

While asthma does not cause many deaths among children in North Carolina, it is one of the most prevalent chronic diseases in our state among children. More than 1 in 4 African American children in NC has been diagnosed with asthma. Asthma, a major chronic illness among school children, is the leading cause of school absenteeism nationwide, according to experts on lung disease. According to the [2018-2019 School Health Services Report](#), school nurses assessed the needs and completed health care plans for approximately 105,326 students with asthma in North Carolina public schools.

North Carolina Public Schools school health nurses participate in reporting to the School Health Services Report which provides important information including the health needs of our children. The Scotland County schools Nurse to Students Ratio is 1 nurse to 553.80 students. In Scotland County, 93% of students had improved outcomes after receiving directed nursing services for Asthma, and were able to return to class.

In 2019, the total number of Emergency Department events due to asthma in Scotland County was 157 for all ages according to NC Disease Event Tracking Epidemiological Collection Tool (NC DETECT) 2020.

10.1% of respondents reported Asthma is the biggest health issue in their family.

Source: 2019 Scotland County Community Health Assessment Survey.

Obesity/Overweight

North Carolina percentages in adult obesity are the 26th highest in the Nation. At its current rate, it will soon become the costliest disease, surpassing cardiovascular diseases. Obesity is a condition affecting many residents in Scotland County and is the number one health problem in children. The 2018 North Carolina Child Health Report Card (NCDHHS) states in 2016, **30.9%** children 10 to 17 years, are overweight or obese and also reported only 23.3% were physically active the recommended total of 60 minutes or more per day on five days or more.

The NC Women, Infants and Children Program (2016) reported 16% of children ages 2 to 4 years are overweight or obese. (CDC; Division of Nutrition, Physical Activity, and Obesity, Data, Trend and Maps (Feb. 2020).

Lack of physical activity and poor nutritional habits are major factors in overweight and obesity however a variety of other factors play a role including the environment, socioeconomic status, culture, behavior, limited access to healthy food options, genetics and some medications. While there are racial disparities in levels of obesity, research has shown that family income is a greater predictor of overweight and obesity, as children living in low income homes or high poverty neighborhoods have less access to safe places to play and full service grocery stores.

North Carolina's response to obesity, are programs such as Eat Smart, Move More, NC; Faithful Families Eating Smart and Moving More and other health promotion initiatives. Scotland County is fortunate to have existing resources or programs such as the Health Department's WIC Nutrition Program, the Healthy Communities Grant programs that include physical activity and healthy eating, access to healthy foods, the Community Health Advisory Board focusing on Obesity, chronic disease prevention and Positive Youth Behaviors, the school system's healthy eating program following guidelines from North Carolina Department of Public Instruction (NCDPI), "Active Recess for Scots" in elementary schools providing additional physical activity daily, Cooperative Extension's Expanded Food and Nutrition Education Program (EFNEP) for youth and adults, physical activity and nutrition programs through Scotland County Health Department, and others such as Weight Watchers and TOPS (Take Off Pounds Sensibly) available. Scotland County Parks and Recreation also has sixteen area parks conducive to physical activity such as walking trails, athletic and summer programs for youth age 5 to 15, senior games and exercise classes.

31.9% of respondents reported Obesity as the biggest health issue in their family. Source: 2019 Scotland County Community Health Assessment Survey.

Child Health

- **Child Care Directions** – Resource and referral agency for parents and child care providers.
- **Child Fatality and Prevention Team** – Scotland County Health Department is the lead agency. Meets a minimum of four times during the year to review incidence and causes of all child deaths in the county.
- **Community Child Protection Team** – Scotland County Department of Social Services is the Lead Agency. Meets quarterly to review protective custody cases.
- **Early Hearing Detection and Intervention Program** – all infants receive an initial hearing screening at birth. Infants who fail are rescreened in 2-4 weeks and referred as needed. Postpartum/Newborn home visit assessment – a Public Health Nurse provides a hearing screening as part of the assessment.
- **Eckerd** – Behavioral Health for at risk children and teens
- **Immunizations** – Scotland County children receive immunizations at the health department, Purcell Clinic and other medical provider's offices.
- **Lead Screening** – available for children less than six years of age at Health Department Purcell Clinic and other medical provider's offices. F/Y 2018-2019, there were 3 child lead exposures
- **Scotland County Department of Social Services** – Federally mandated, state supervised, county administered, Social Service System.
- **Scotland County Health Department** - Child Health Program – immunizations, pediatric orthopedic clinic, postpartum/newborn visits, screenings for blood lead poisoning and sickle cell. Monthly sickle cell counseling services are offered on site by Regional Sickle Cell Counselor.
- **Scotland County Partnership for Children and Families – (Smart Start)** – established in 1998 to implement North Carolina's school readiness initiative and has successfully improved the quality of childcare, parenting resources, access to health care and other support systems.
- **Scotland County System of Care** - community services and resources to assist families and children who are in need of multiple services from human services agencies to address serious and complex behavioral, social, academic and safety needs.
- **Care Coordination for Children (CC4C)** – links families with children from birth to five who may have special health needs to community resources and services.
- **Special Needs Program** - The Arc of Scotland County (Association of Retarded Citizens) – volunteer organization devoted to improving the welfare of persons with mental retardation or developmental delays by acting as a support group for families and advocating for their rights as citizens.
- **The Autism Society of North Carolina** – Scotland County chapter – community-based services.
- **Together We Grow – North Carolina Early Intervention Services** – comprehensive, interagency system of services provided by many different agencies and programs for children birth to five years and their families.
- **Women, Infants and Children – (WIC)** – also known as the Special Supplemental Nutrition Program. WIC is a Federal program funded by the United States Department of Agriculture (USDA). It is designed to provide food to low income pregnant, postpartum, and breastfeeding women, infants and children until the age of five. Available at Scotland County Health Department.
- **Evergreen Behavioral Management** (formerly Family Alternatives) – provides a Day Treatment Program offered to children up to age 20 years of age; Intensive in-home services; Community Support Teams
- **Community Innovations** – provides child case management Intensive in-home services for children and families; Community Support Teams;

- **Scotland Family Counseling Center, Inc.** – provides outpatient counseling to children and families; Faith Integrated counseling and professional services

Communicable Disease

The goal of the Communicable Disease Program at Scotland County Health Department is to stop the spread of disease by investigating sources of infection and reduce transmission through public education. This is done through the cooperation of physicians, hospitals and medical laboratories. Case management is available to clients diagnosed with tuberculosis.

There are sixty-six non-sexually transmitted reportable diseases. There are blood-borne diseases such as Hepatitis B and C and enteric diseases such as salmonella and shigellosis. Hepatitis A is a food-borne disease. Vector-borne diseases include West Nile Virus, Eastern Equine Encephalitis, Rocky Mountain spotted fever and Lyme disease. Some communicable diseases are air-borne like SARS (Severe Acute Respiratory Syndrome) and Tuberculosis. There are also agents of terrorism such as anthrax, smallpox and plague.

Medical providers, laboratories and the state communicable disease branch reports diseases to the health department. The communicable disease staff determines if the reported disease meets the case definition set by the Centers for Disease Control and Prevention. This is done by contacting hospitals and physician's offices for symptoms of the patient.

Persons with certain diseases are restricted in activities to decrease transmission. Persons with active TB are limited in activities until they are no longer infectious. In order to decrease drug-resistant cases of Tuberculosis, "Directly Observed Therapy" (DOT) is the standard of care. This means each dose of anti-tuberculin medication is administered by a health care worker.

Communicable Diseases reported in Scotland County for 2018 were Hepatitis A (0); Hepatitis B (2); Hepatitis B Carrier (0); Hepatitis C (46); HIV (3); AIDS (6); STD's (498); Salmonella (12); Shigellosis (0); NGU (12); Campylobacter (1) and Tuberculosis (5).

In 2018, Scotland County had 314 confirmed cases of Chlamydia; 155 confirmed cases of Gonorrhea; Sixty percent of STD cases were reported by people ages 15 to 24 yrs. with 133 of those ages 15 to 19 yrs. and 5 cases were reported for children aged 10 to 14 yrs. African Americans and Native Americans had higher rates of STD's (68.8% and 8.8% respectively) than Whites at 17.4%.

Dental Health

Scotland County has eight local dentists (or 2.53 per 10,000 population), 11 dental hygienists, one orthodontist and a Public Health Dental Hygienist (Sheps Center for Health Services 2019). Most of the local dentists accept Medicaid for their established patients and only one accepts new Medicaid patients. Other resources in Scotland County include:

- The Purcell Clinic's **"Into the Mouths of Babies" Program** under the North Carolina oral Health Section of DPH (Division of Public Health) – high risk children that qualify will have fluoride varnish painted on their teeth during their well baby checkup.
- **Scotland County Health Department** – refers children to Richmond County Health Department Dental Clinic and has a contract with ECU Dental Clinic in Lumberton to refer children with no insurance or Medicaid for dental services.
- **North Carolina Health Choice Program** – pays for dental services for children that qualify.
- **North Carolina Oral Health Section of DPH** (Department of Public Health) – local Public Health Dental Hygienist is active in major preventive procedures such as water fluoridation, dental sealant promotional projects, and risk assessment-referral and follow-up services. Education is integrated within each of these activities. www.communityhealth.dhhs.state.nc.us/dental/
- **Stewartsville Baptist Church** – hosts an annual free one day dental health clinic with volunteer providers (dentists, dental hygienists) for uninsured or low income residents of all ages.

- There are also out of county dental resources that many of our residents take advantage of such as **First Health Dental Care** and the **UNC School of Dentistry**.

12.9% of survey respondents indicated dental health was the biggest health issue in their family.
Source: 2019 Scotland County Community Health Assessment.



Public Health Dental Hygienists Carver Elementary 2019



Carver Elementary Dental Sealant Project 2019

Environmental Health

The Environmental Health Section of the Scotland County Health Department protects and improves the public's health by controlling environmental factors which can adversely affect human health. This section provides preventative health through inspections, education, and enforcement of state and local rules in programs for food and lodging; on-site wastewater disposal; air quality, pools, tattoo establishments and institutions; child daycares; mosquito and vector control; private well water construction; child lead poisoning; and animal control. Referrals are made for solid waste enforcement, air quality concerns, public water supplies, hazardous materials, groundwater protection and other related environmental issues. The Scotland County Health Department's Environmental Health Section responds to other environmental issues as needed.

Scotland County Health Department has two Environmental Health Specialists and two Animal Control Officers to provide services for the county.

- Animal Control Program – enforce state and county law ordinances and rules pertaining to the care, custody and control of animals in Scotland County
- Well and Septic System Permits
- Restaurants/Lodging/Pools – inspections
- Tattoo Parlors - inspections
- Mosquito Control – ensures that mosquito control rules are enforced to protect public safety.

The City of Laurinburg has one Animal Control Officer who provides services within city limits and enforces city ordinances and state laws.

Hearing/Vision Health

- **North Carolina Council for the Hearing Impaired** – all infants receive an initial hearing screening at birth. Infants who fail are rescreened in 2-4 weeks by the Newborn Hearing and Follow-up Program. A staff member from the Early Hearing Detection and Intervention Program screens infants at Scotland County Health Department monthly.
- **North Carolina Division of Services for the Deaf and Hard of Hearing**
- **North Carolina Division of Services for the Blind in Scotland County** – serves blind or visually impaired adults and children.
- **Speech Solutions, Inc** – assess, diagnose and treat patients to help prevent speech, language, cognitive, communication, voice, swallowing, fluency and other speech disorders

- **Scotland County School System** – provides hearing and vision screening for first and third graders as well as students in the Exceptional Children's Program and other students referred by teachers.
- **Lions Club** – provides programs, funds and transportation to visually impaired persons

HIV/AIDS/STD

Scotland County Health Department and most health care providers provide confidential HIV/AIDS as well as sexually transmitted disease tests through examinations and/or blood screenings that test for the presence of antibodies to HIV. Public Health is mandated to offer free sexually transmitted disease screenings and treatment to anyone that requests the service. Clients who test positive for HIV/AIDS, or are referred to the health department, are offered case management services through the Border Belt AIDS Resource Team or Robeson Health Care Corporation in Lumberton, NC. Scotland County Health Department added a new Early Intervention (EIC) Clinic in July 2012 working with Robeson Health Care Corporation's (RHCC) Ryan White Part C Program to care for patients diagnosed with HIV/AIDS.

- **H.E.A.R.T.** – Scotland County Health Education and Resource Team – meets monthly for HIV/AIDS education promotion and the planning of fundraising activities to help meet the emergency needs of clients living with HIV/AIDS in Scotland County. This group also sponsors two annual events to raise awareness of HIV/AIDS which are coincided with national recognition days. The H.E.A.R.T. HIV/AIDS Walk-a-thon which is usually held in June with National HIV Testing Day, and the H.E.A.R.T. World AIDS Day Candlelight Vigil held on or around World AIDS Day in December each year. Citizens of Scotland County are encouraged to join this group on the third Thursday of each month.
- **B.A.R.T.** – Border Belt AIDS Resources Team – Lumberton, NC

Influenza/H1N1 Influenza

Influenza (the flu) is a contagious respiratory illness cause by influenza viruses. It can cause mild to severe illness, and at times can lead to death. The safest, most effective way to prevent the flu is to get vaccinated. The Centers for Disease Control recommends that everyone six months and older get their yearly flu vaccine.

Sometimes people are infected with influenza viruses that are not the normal seasonal strains. These infections are often related to contact with influenza viruses from animals, such as birds or pigs. While most of these infections are isolated cases or small clusters, these unusual or "novel" influenza viruses have the potential to spread widely and cause pandemics if they are able to spread from person-to-person, as is the case during the 2019 Coronavirus.

According to public health officials, cases of flu in our state were relatively high in 2018 and 2019 season. Flu season typically peaks during January and February. Complications from flu can be particularly dangerous for high risk groups including infants under 2, pregnant women, and people with chronic medical conditions such as asthma, diabetes, heart disease, or immune system problems.

The N.C. Department of Health and Human Services announced September 2019 through February 2020, the state had 63 deaths linked to infection with seasonal influenza. In Scotland County, Seasonal Influenza vaccines are available at the Scotland County Health Department, Scotland Health Care System, medical provider offices and pharmacies.



SCHD Flu Clinic 2017



Staff promoting Immunizations



SCHD Flu Clinic 2019

Mental Health/Depression/Suicide/Substance Misuse

- **Eastpointe Mental Health Services...**
 - Access line: 1-800-913-6109
 - 24-Hour Crisis Services: 1-800-913-6109
 - TTY: 1-888-819-5112
- **Scotland County Department of Social Services**
 - Substance Abuse Counselor – specifically for Work First and Food Stamp Clients
 - Crisis Hotline referral
- **Scotland County Health Department** – Crisis Hotline available
- **Scotland Memorial Hospital** – provides referrals to outside mental health agencies
- **Scotland Family Counseling Center**
 - Outpatient counseling – individuals, families, marital, children
 - Substance Abuse Treatment - referral
 - Client Aid Program (sliding scale based on income)
- **New Beginningz, Inc. –**
 - Substance abuse rehabilitation services;
 - Diagnostic assessment,
 - Case formulation/management,
 - Treatment/recovery;
- **Generations Health Services, LLC -**
 - Family Therapy
 - Group Psychotherapy
 - Anger Management
 - Psychiatric Services
- **Community Innovations –**
 - Outpatient Therapy – Family and Individual
 - Adult and Child case management
 - Community Support Team (CST)
 - Intensive in-home services for children and families
 - Psychiatric Services – med management
 - Day Treatment Program – in progress
- **Evergreen Behavioral Management (formerly Family Alternatives)**
 - Outpatient Therapy
 - Physician on-site
 - Community Support Team
 - Intensive in-home services
 - Day Treatment Program – children only up to age 20 years
 - Accepts referrals
- **Southeastern SELF Recovery**
 - Professional assessment (DWI, Substance Abuse)
 - Recovery Home Services
 - Consultations
 - Treatment
 - Intensive Outpatient Programs
 - Individual and Group Counseling
- **Health care providers**
 - Referrals

EastPointe, M.C.O.



SCHD Staff Promoting Unity Day 2018



School Health

- **School Health Advisory Council** – membership from school personnel representing administration, child nutrition, counselors, nurses and physical education and community representatives from the Health Department, Hospital, Purcell Clinic, Community members, Mental Health agencies, and others.
- **Child and Family Support Team** - Teams of nurses and social workers have been placed in seven schools within the district to assist children and families in securing resources and services to help the child be successful in school.
- **Dropout Prevention Coordinator** – The coordinator works with students on an individual and/or group basis to address barriers that prohibit them from being successful in school.
- **Safe Schools Drug and Prevention Program** – Five Resource Officers, one at each of the three middle schools, the high school and at the Alternative Learning Academy, provide random inspections daily to ensure the safety of students and faculty.
- **Expanded Food and Nutrition Education Program (EFNEP)** – 4-H Scotland County Cooperative Extension – collaborates with Scotland County Public School system to provide nutrition and physical activity education classes during the regular and after school day programs.
- **Exceptional Children's Program** – through Scotland County School System which provides the additional educational and support services that these students require. The program's objective is to identify the unique needs of each exceptional student and develop an Individualized Education Program (IEP).
- **Connect Ed** – Scotland County School System's telephone notification system allows school administrators to place calls system-wide in the event of emergencies or inclement weather.
- **Head Start** – a Federal program for preschool children from low-income families. Four-County Community Services, Inc. administers the Head Start Program in Scotland County. Head Start provides the social, nutritional, and educational advantages needed for a successful start in school. It assures that "no child is left behind."
- **School Health Initiatives** – In 2018 and 2019, Scotland County Health Department staff provided STD and Family Planning education to Scotland High School students and the program "Making Proud Choices" (teen pregnancy prevention education) to middle school students reaching over 900 students.

Women's Health

- **Scotland County Health Department** –
 - Family Planning Program – services to improve pregnancy outcomes and the health status of men and women before pregnancy. Program provides pregnancy planning counseling and birth control.
 - Pregnancy Care Management (PCM) – provides care management services for pregnant and post-partum women.
 - Newborn, Postpartum Home Visits
 - Women, Infants and Children (WIC) program
 - Breastfeeding Peer Counselor – breastfeeding classes for expectant parents
 - Parenting Classes – includes breastfeeding, primary care for baby, birth control options, safe sleep/SIDS and child passenger safety/car seat instruction
- **Scotland Health Care System**
 - Labor and Delivery – deliveries and emergency care
 - The Women's Center – at Scotland Memorial Hospital offers prenatal classes that promote the health and well being in preparation of pregnancy, childbirth, breastfeeding and parenting.
 - a bereavement program to support families experiencing a loss
 - Screenings – free mammograms to women at the Community Health Clinic

Scotland County Community Health Assessment | 2019

- **Private Sector** - Scotland County has two OB/GYN Practices, one certified midwife, and two certified nurse practitioners that provide obstetrical care. Deliveries and emergency care are performed at Scotland Memorial Hospital.
- **Scotland Memorial Foundation** – sponsors a Women’s Health Event annually that includes educational breakout sessions and health screenings (cholesterol, blood pressure, bone density, height/weight and body fat).
- **Scotland Community Health Clinic** – provides health care for the uninsured ages 18 years to 64 years.
- **Scotland County Adolescent Wellness Council** – promotes the health of teens, with a top priority of pregnancy prevention.
- **Leadership and Education for Adolescent Parents (LEAP)** – program through Scotland County Partnership for Children and Families and Scots for Youth and served teen age parents both male and female. Active since June 2009.
- **Scotland County School System** - provides a “Healthy Living” curriculum for grades four through nine. Age appropriate preventive health is taught to these students.
- **Churches and Youth Organizations** - sponsors health programs that promote teen pregnancy prevention, physical activity and nutrition.

(Scotland County Health Department Outreach Efforts – 2018-2019)



Retired Senator Wm .Purcell O.P.E.N



Colorectal Cancer Billboard 2017



Community Diabetes Health Fair 2018



SCHD Staff Friendship Festival 2018



SCHD/DSS Staff Breast Cancer Walk 2019



Rep. Pierce Community Day 18



Educational Bulletin Board Sample 2019



Child Health/Immunization Exhibit 2017



School Health Fair 2019

Section V

Other Priorities: Resources and Programs

- Alcohol/Substance Misuse
- Domestic Violence
- Health Literacy
- Health Promotion
- Physical Activity/Nutrition
- Poverty/Low Income/Uninsured
- Preparedness and Response (Bioterrorism)
- Residential Living or Long Term Care for Seniors
- Safety/Injury Prevention
- Smoking and Tobacco
- Transportation

SCHD Staff



DSS Family Fun Day 2019

Representative Garland Pierce



Outreach Laurel Hill Festival 2019



Rabies Awareness on WLNC Radio 2018



GASO Exhibit, UNCP Student Intern 2019

Alcohol/Substance Misuse

- **Alcoholics Anonymous Support Group**
- **Eastpointe Substance Abuse Prevention**
- **Opioid Prevention and Education Network (O.P.E.N.)**
- **Southeastern SELF Recovery** (an affiliate of Southeastern Regional Medical Center)
 - DWI assessment,
 - Substance Abuse Assessment
 - Recovery Home Services
 - Consultations
 - Substance Abuse Comprehensive Outpatient Treatment
 - Intensive Outpatient programs
 - Individual and Group Counseling
- **New Beginningz, Inc. –**
 - Substance abuse rehabilitation services;
 - Diagnostic assessment,
 - Case formulation/management,
 - Treatment/recovery;
- **Generations Health Services, LLC –**
 - Individual, Group and Family Therapy for chemical dependency
 - Substance Abuse Intensive Outpatient Program
 - Psychotherapy services
 - DWI (Driving While Impaired) services
- **Scotland Family Counseling Center**
 - Outpatient counseling – individuals, families, marital, children
 - Substance Abuse Treatment - referral
 - Client Aid Program (sliding scale based on income)

12.3% of survey respondents reported alcohol/substance abuse was the biggest behavior risk factor that impacts their family. Resource: 2019 Scotland County Community Health Assessment.

Representative Garland Pierce



O.P.E.N. Opioid/Substance Misuse Vigil 2019



O.P.E.N. Vigil – shoes representing OD deaths, 2019

Domestic Violence

- **Domestic Violence and Rape Crisis Center of Scotland County**
 - 24 hour crisis line
 - Shelter for victims
 - Support Groups
 - Education and support services for victims to deal with their trauma
 - Law Enforcement and legal procedures information
 - Community education programs

Health Literacy

- **Scotland County Literacy Council** –
 - Adult basic education – life skills, reading, job skills
 - GED preparation
 - English as a second language
 - One on one and small group tutoring (school age children and adults)
- **Scotland County Memorial Library** – provides community with opportunities for reading, research, computer skills, youth and adult programs, online services, e-books, audio books, DVD's and a Book Mobile that travels throughout the county weekly. Public has access to ten computers in addition to numerous databases. Patrons have access to over six million items today.

Health Promotion

- **Scotland County Health Department** – promotes healthy lifestyles through educational sessions; screenings, health care, immunizations, support for breastfeeding, child passenger safety, parenting, collaboration with other agencies providing programs and/or events pertaining to health issues, physical activity, nutrition and opioid prevention and education.
- **North Carolina Cooperative Extension, Scotland County** – provides educational programs such as nutrition and physical activities through the Expanded Food and Nutrition Program (EFNEP) for adults and children and 4-H Club activities
- **Scotland County Health Care System** – provides free community health screenings, educational sessions, collaborates with other agencies to provide information/education, sports physicals for middle and high school students involved in team sports and hosts an annual Women's Health Event which includes free health screenings and a full day of educational sessions on a variety of topics.
- **Scotland County Parks and Recreation** – promotes healthy lifestyles through fitness activities and sports for youth, activities for the older population such as Senior Games, a variety of exercise classes, Tai Chi, Arthritis Foundation Exercise class, Yoga, Silver Sneakers, a variety of health education programs, clubs, and other leisure opportunities.
- **Healthy Communities Initiatives** – initiates health education and promotion programs to educate the public about risk factors that promote chronic disease especially focusing on cancer prevention, smoking cessation, opioid prevention and promotes healthy lifestyles by implementing physical activities and nutrition programs in collaboration with agencies throughout the community.
- **ICO4MCH** – Improving Community Outcomes for Maternal and Child Health

Physical Activity/Nutrition

- Eat Healthy/Be Active - Scotland County Health Department
- Child Care Directions - Child and Adult Care Food Program (CACFP)
- Scotland County School System
- Scotland County Parks and Recreation and Senior Center
- Scotland County Health Department
- Scotland Health Care System
- Scotland County Co-Operative Extension – Expanded Food and Nutrition Education Program
- Wagram Recreation/Active Living Center

44% of survey respondents reported lack of physical activity as the biggest behavior risk factor that impacts their family. Source: 2019 Scotland County Community Health Assessment.

Poverty/Low Income/Uninsured

- **Scotland County Department of Social Services**
 - Medicaid Program
 - Food Stamp Program
 - Temporary Assistance for Needy Families (TANF) program called "Work First"
 - Emergency Assistance Program – financial help to pay for housing and utilities
 - Child Support Services in collaboration with the Court System
 - Low-income Energy Assistance Program (LEAP)
- **Senior's Health Insurance Information Program – (SHIIP)** Prescription Drug Assistance for Senior citizens located at Scotland Senior Center
- **Habitat for Humanity** – ecumenical, Christian housing ministry dedicated to building and selling decent, affordable homes in partnership with families in need. Opened a new "Restore" in 2008.
- **Scotland County Concerned Citizens for the Homeless** – provides transitional housing for the homeless who do not qualify for state or federal aid and operates a Helping Hand Thrift Store.
- **Four-County Community Services, Inc.** – provides services in a seven-county area which help people help themselves
- **Laurinburg Housing Authority** – provides decent and safe rental housing for eligible low-income families, the elderly, and persons with disabilities;
 - Section 8 Program – Family self-sufficiency program – allows a family to build an escrow account if they increase their income and graduate from the program
 - Homebuyer Assistance Program – assists with mortgage payment through Section 8 Program
- **Star of Bethlehem Missionary Baptist Church** - operates a community food bank
- **Northview Harvest Outreach Ministries** – assists those in need for food, clothing and household items
- **Church Community Services** – funded through United Way, Federal Emergency Management Agency (FEMA) and local churches and individuals – provides emergency assistance for rent, utilities and medical care and also food and clothing.
- **Scotland Health Care System** – provides significant care to needy and underinsured Partners with Scotland County Health Department and Scotland Community Health Clinic to provide free mammograms to female clients;
- **Scotland County Health Department** – offers communicable disease including sexually transmitted disease diagnosis and treatment without charge and a children's vaccine program. Sliding fee scales are available in the Family Planning program.
- **Health Check/North Carolina Health Choice for Children Program** – follows Medicaid eligible children and assist families to maximize the health and development of their infants, children and teens until age 21. Children, up to age 19, may qualify for Health Choice for Children. Family income must be below 200% of poverty to be eligible for Health Choice.
- **Scotland Community Health Clinic** - provides quality health care for the needy and uninsured residents (age 18 yrs. to 64 yrs) of Scotland County. The Clinic works with 1 part time Family Nurse Practitioner, Volunteer Physician for 4 hours/month, 1 part time triage CNA.
 - 2019 - approximately 170 active patients (327 active in 2016)
 - Collaborates with LabCorp who provides donated lab services
 - Collaborates with Charlotte Radiology and Scotland Memorial Hospital to provide routine imaging
 - Prescription Assistance Program utilizing the Pharmacy Connection – have assisted 170 patients with 3,122 ninety-day prescriptions in excess of \$2.2 million.
 - Provided 685 patient visits for 221 unduplicated patient visits in 2019
 - Provides diabetic testing devices and diabetic testing strips

- **Scotland County Parks and Recreation** – facilitates activities at Scotland Place Senior Center providing Senior Health Insurance Information Program (SHIIP). This program collaborates with the North Carolina Department of Insurance to inform seniors about medial benefits and the Medicare Prescription Drug Program
- **Medication Assistance Program** – Lumber River Council of Government Area Agency on Aging
- **Scotland County Aging Advisory Council** – identifies services for our aging population working with Lumber River Council of Government Area Agency on Aging.

Preparedness and Response (Bioterrorism)

Scotland County Health Department's Preparedness and Response Program prepares health department staff, community leaders and members for incidents and disasters which are natural, chemical, biological, and radiological or of a communicable disease nature. The process of preparation includes developing an "all hazards" plan, protocols and procedures. Then through training and exercises such as drills, tabletop exercises and full scale exercises, the staff and community are prepared to respond to a possible incident or disaster with knowledge and confidence.

Scotland County Health Department shares a Preparedness and Response Regional Coordinator with Harnett and Bladen Counties. The Preparedness and Response Coordinator works in conjunction with the NC Office of Public Health Preparedness and Response. Other key components include, North Carolina Health Alert Network (NCHAN) which is a secure, internet based alerting system provides 24/7 flow of critical health information among North Carolina's state and local health departments, hospital emergency departments, and law enforcement officials through simultaneous use of phone, fax, email, and pagers to communicate urgent health information.

The N.C. Disease Event Tracking and Epidemiologic Collection Tool ([NC DETECT](#)) provides statewide early event detection and timely public health surveillance to public health officials and hospital users. The data is continually collected from hospital emergency departments, the Carolinas Poison Center, and other medical facilities. The system was created by and is managed by the N.C. Division of Public Health and the Department of Emergency Medicine at the University of North Carolina at Chapel Hill, with support from the CDC. Tying all of these components together is the [NCHAN web site](#), used both as a conduit for exchanging health information and as a resource for accessing an almost limitless collection of information on disease control and bioterrorism issue.

Residential Living or Long Term Care for Seniors

Scotland County provides several alternatives for senior living or long term care through the following:

Adult Care Homes – Assisted Living – 2

- **The Meadows** – Assisted Living Units - 80 beds (private, semi-private).
- **Prestwick Village** – Assisted Living Units - 100 beds (private, semi-private).

Family Care Homes – Licensed – 3

- Blair Assisted Living #1 – Family Care Units - 6 beds each. Licensed health professional support, home health support, supervision for personal care, activities
- Blair Assisted Living #2
- Blair Assisted Living #3

Skilled Nursing Homes – 2

- **Scotia Village** – Nursing Care Units – 50; Special Care Units - 12
- **Scottish Pines** – Nursing Care Units - 99

Continuing Care Retirement Community

- **Scotia Village** – Independent Living Units – 100; Assisted Living Units – 20; Nursing Care Units – 50; Special Care Units - 12

(Independent) Senior Living

- **Cedar Trace Landing** – Independent Living Units – 48; Secured facility. Income guidelines for eligibility.
- Programs and services offered include health screenings, presentations, short outings and trips, activities such as bingo, exercise. Technology Center and Community Room.
- Transportation includes SCATS (Scotland County Adult Transportation System).

Scotland County Adult Day Care and Scotland County Adult Day Health Care

- Open 5-days a week from 8am to 3pm. Average daily participation – 15 to 18.
- Provides adult day care services that include transportation, activities including physical activity, crafts, short outings, meals, guest speakers, family counseling and support, and Adult Basic Education. Skilled nursing and licensed practical nursing staff available.
- Provides an organized program of services during the day in a community group setting for the purpose of supporting older adults' personal independence, and promoting social, physical, and emotional well being. Services include health care services.

Hospice of Scotland County

- **"Morrison Manor"** – residential facility offering state of the art comfort measures and symptom management for progressive terminally ill patients or those without a caregiver. Six individual suites accommodate patients and their families for privacy. Admissions approved by appropriate criteria and need for placement.
- **"Morrison Manor"** – used for patients with a higher level of medical acuity.

Laurinburg Housing Authority

- Income based residential living for seniors/elderly disabled/handicapped. Approximately 80 units available for seniors and elderly disabled or handicapped.
- Services offered include adult life enrichment programs/activities, transportation.
- Public Housing and Section 8 is available to seniors.

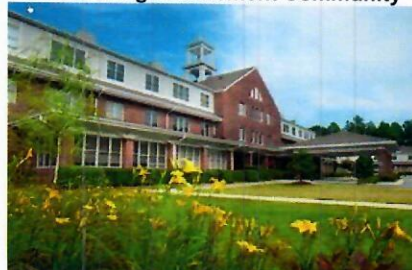
Home Health Agencies – 10

- **HealthKeeperz** – provides nursing care, physical therapy, occupational therapy, speech pathology, medical social, and home health aides.
- **Better Home Health Care** – provides in-home services such as skilled nursing, personal care service, home health aides, private-duty nursing, and CAP (Aids, children, adults) services, HIV case management.
- **Assisted Care Health and Home Care Specialists**
- **Healthcare Connections**
- **Native Angels Home Care Agency, Inc.**
- **Liberty Home Care and Hospice**
- **Home and Family Health Care**
- **Carolina Therapy**
- **Horizon Homecare**
- **Piedmont Home Care**

Prestwick Village Assisted Living



Scotia Village Retirement Community



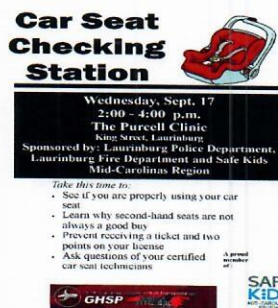
Safety/Injury Prevention

The Fire Department, Police Department, Highway Patrol, Scotland County Health Department, Department of Social Services, Child Care Directions, American Red Cross, Scotland County School System, and others are among the resources in Scotland County that offer programs addressing safety and injury prevention.

- **Scotland County Safe Kids** – a chapter of the North Carolina Safe Kids Coalition whose mission is to prevent unintentional injuries among children ages 0-14yrs. Scotland County Health Department, the Highway Patrol, North Laurinburg Fire Department and Emergency Medical Services, and law enforcement have several Certified Child Safety Seat Technicians trained to instruct individuals on proper safety seat installation and provide car seat checks to insure proper installation for age and weight appropriate child restraint systems being used.
- **SAFETY TOWN** – provided by Child Care Directions, introduces safety awareness and preventive procedures to pre-kindergarten children
- **Safe Kids Mid-Carolinas Region Coalition** – promoting child passenger, fire, bicycle, pedestrian, furniture, toy, battery and other safety through regional events and education.



Animal Control visits Safety Town 2018



Safe Kids Mid-Carolinas



SCHD Staff Unity Day 2018

Smoking, Tobacco and E-cigarettes

Cigarette smoking remains the single leading preventable cause of death and disability in the United States. Over 16 million Americans have at least one disease caused by smoking that amounts to \$170 billion in direct costs annually. In 2017, 19.5% of US high school youth reported currently using any tobacco product, including e-cigarettes. In North Carolina, 12.1% of high school youth reported currently smoking cigarettes.

Health Effects and Mortality - Lung cancer, heart disease, and the chronic lung diseases of emphysema, bronchitis, and chronic airways obstruction, are responsible for the largest number of smoking-related deaths (CDC, 2019). The risk of dying from lung cancer is more than 23 times higher among men who smoke cigarettes and about 13 times higher among women who smoke cigarettes compared to those who have never smoked. Women who smoke increase their risk for developing coronary heart disease and increase by more than 12-13 times their likelihood of dying from chronic obstructive pulmonary disease, and increase their risk for other cancers (DHHS/CDC, 2019). In addition, cigarette smoking increases the risk for infertility, preterm delivery, stillbirth, low birth weight, and sudden infant death syndrome (SIDS).

Since 2006, Scotland County Health Department along with all Government Buildings in Scotland County adhere to a smoking ordinance preventing smoking or using tobacco products within 50 feet of the buildings. North Carolina is celebrating Ten Year Anniversary of House Bill 2, signed by Governor Beverly Perdue (no smoking in restaurants) in 2009. Scotland County's Senator William Purcell, one of the Bill sponsors, was instrumental in getting the new law passed which became effective January 2, 2010. The law prohibits smoking in nearly all restaurants, bars

and lodging establishments that prepare and serve food and drink. Proponents say the law will protect people from the adverse health effects of second-hand smoke.

Since July 2013, Scotland County Parks & Recreation implements a "No-Smoking/Tobacco Use" Policy providing signage to all parks and recreation areas where children play through the Region 6 Community Transformation Grant Project.

Free, confidential quit coaching for any tobacco use who wishes to quit is available through QuitlineNC at 1-800-QUIT-NOW (784-8669). QuitlineNC is available daily. Translation service is also available.

13.1% of respondents reported the use of tobacco products is the biggest behavior risk that impacts their family. Source: 2019 Scotland County Community Health Assessment Survey.

Quitline NC



Signage at Public Parks 2018

Healthy Communities Initiative



Smoke Free/QuitlineNC Billboard 2016

Transportation

Transportation plays a vital role in the health and well being of Scotland County residents since "transportation" enables or diminishes access to services such as health care, as well as access to employment, school, day care, and more.

Though Scotland County is considered a rural county and ranked 64th in the State in population, approximately 54% of Scotland County residents live in rural areas (or outside the city of Laurinburg), compared to 33% of North Carolina's population and 20% nationwide. Populations living in our rural areas are more likely to be living in poverty, and thereby less likely to have access to transportation. This is particularly true for rural racial minority and Hispanic populations.

- Scotland County Area Transit System (SCATS) – Two used by the general public to go, via circuitous route, to various neighborhoods, shopping, physician offices, pharmacies, etc. within the city of Laurinburg. Cost is \$1.00 per day. Seven vehicles are used for medical purposes.
- Scotland County Social Services – provides medical vans county-wide through its Medicaid office for persons needing transportation to doctors' offices or to the hospital, based on a doctor's referral by reservation.
- Scotia Village and Scottish Pines – offer transportation to their senior citizen residents.
- Laurinburg Housing Authority – offers transportation to their resident seniors in their programs and to their disabled residents
- Braveheart Medical Transport – medical assistance transportation
- Other – Mary's Taxi Service – There is no public bus system or passenger rail system in the county. However, charter and rental buses are available.

1.5% of respondents reported lack of transportation kept them or their family from seeking medical treatment. Source: 2019 Scotland County Community Health Assessment Survey.

Section VI

Health Priorities...Past and Present

In the 2019 Community Health Assessment Survey, respondents once again identified concerns for health issues and behavior risks. The top concerns of chronic disease remained consistent in the 2013 and 2016 reports. Top health concerns common with the 2013 report were: High Blood Pressure, Diabetes, Heart Disease, and Cancer. The top five community behavior risks identified in 2013 were somewhat common with the 2016 survey with lack of physical activity ranking first today followed by use of tobacco, poor nutrition and substance abuse. In summary, "all" community health concerns and behavior risks taken from the 2016 community health assessment survey remain nearly consistent with the 2019 survey response. Since 2000, the top three health concerns common today are: High Blood Pressure, Diabetes and Heart Disease.

The table below depicts the top ten priority health concerns in 2016 and similar health and behavior concerns in 2019. Issues are common across the board, with the exception of certain issues switching up or down slightly in the ranking.

2016 Health Priorities	2016 Behavior Risk	2019 Health Priorities	2019 Behavior Risk
High Blood Pressure	Lack of Physical Activity	Obesity	Lack of Physical Activity
Heart Disease	Poor Nutrition	High Blood Pressure	Poor Nutrition
Diabetes	Use of Tobacco	Diabetes	Tobacco/Vaping
Cancer	Substance Abuse (Drug and Alcohol)	Cancer	Substance Abuse (Drug and Alcohol)
Obesity	Other	Obesity	Dental Health
Stroke	Unprotected Sex	Stroke	Crime and Violence
Dental Health	Child/Spouse/Parent Abuse	Dental Health	Bullying
Mental Health	Seatbelt Use	Mental Health	Unprotected Sex
Asthma/Lung Disease	Environmental Factors	Asthma/Lung Disease	Seatbelt Use
Smoking/Tobacco	Crime	Smoking/Tobacco	Suicide

Subsequent to review of the 2019 Health Assessment Survey data and secondary data the Core Work Group and CHA Team and committee made a decision by process of elimination to address the main concerns, develop action plans, and focus on:

- Obesity (focus on chronic disease prevention and physical activity and nutrition)
- Mental Health (Substance Misuse to reduce overdose deaths;
- Youth Engagement and Healthy Behaviors (Vaping, Dental, Pregnancy Prevention, Physical Activity, Healthy Eating, Adverse Childhood Experiences)

The Scotland Community Health Assessment Core Work Group are reviewing this report and the results of the 2019 Community Health Assessment Survey to develop action plans for the focus areas we will address through 2022. Obesity, Mental Health (incl. Substance Misuse/Tobacco) and Youth Behavioral Health will remain priority areas and these may be expanded on or additional areas will be determined. In 2020, the Core Work Group will develop action plans for the current areas of focus and any new priority areas we are able to address.

Compare with NC 2020 Healthy Objectives

Every ten years since 1990, North Carolina has set decennial health objectives with the goal of making North Carolina a healthier state. One of the primary aims of this objective-setting process is to mobilize the state to achieve a common set of health objectives. One of the goals of the Healthy NC 2020 project was to develop a limited number of health objectives, rather than the large number of objectives

set for 2010 which made it difficult to focus attention on key objectives that could lead to overall health improvements. The Healthy North Carolina 2020 Objectives includes a specific 'target' that provides a quantifiable way to measure our success in achieving the objectives we set out to accomplish or at least improve upon.

2020 Health Objectives Focus Areas

Tobacco Use – addresses concerns about tobacco use which is the leading cause of preventable death in North Carolina.

Physical Activity and Nutrition – addresses concerns about overweight and obesity for both children and adults.

Injury and Violence – addresses reduction of injuries, child abuse, motor vehicle injuries, sexual assault, homicide, suicide, and injuries caused by weapons.

Maternal and Infant Health – addresses concerns about newborn health and well being and addressing women's health essential to improving birth outcomes.

Sexually Transmitted Disease and Unintended Pregnancy – address concerns about sexually transmitted diseases including HIV infection and unintended pregnancy that affects tens of thousands of North Carolinians every year.

Substance Abuse – addresses concerns of substance use and abuse which are major contributors to death and disability in North Carolina.

Mental Health – addresses mental health which is an integral part of individual health.

Oral Health – addresses oral health of children due to inadequate dental health services, reducing tooth decay and tooth loss for all ages, and increasing access to dental health services.

Environmental Health – addresses the impact of the environment on the health of the community, i.e. areas of food safety, air, soil, and water quality, and work related injuries.

Infectious Disease and Foodborne Illness – addresses childhood vaccinations, influenza and pneumococcal vaccinations, and reduction of critical violations in restaurants and/or food stands.

Social Determinants of Health – addresses the impact poverty, education level, and housing which are factors that are strongly correlated with individual health.

Chronic Disease – addresses leading causes of premature death due to cancer, diabetes, heart disease and stroke.

Cross-Cutting – addresses strategies to increase average life expectancy of individuals

While North Carolina has moved in the right direction on many of the 2020 Health Objectives, there were worrisome trends that continue. The most significant concerns are the decrease of adults with health insurance, increase of diabetes death rates, and the increase in overweight and obesity among adults and children. These concerns were also on the mind of Scotland County respondents in the 2019 Community Health Assessment Survey. The results of the survey follow in Section VII (Appendices) in graph form.

The recent Healthy North Carolina 2030 Initiative, developed by The North Carolina Institute of Medicine, provides goals set through health indicators that will also be utilized as we move forward with our Community Health Improvement Plan.